



## Safeguarding & Child Protection Policy

(Adapted from West Sussex Model Policy)

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*Brighton Forward is committed to reviewing its policy and good practice annually.*

*This policy was revised on 1<sup>st</sup> October 2024*

*Laura Vallone*

## 1. Key Contacts

Designated Member of Staff for Safeguarding: Laura Vallone

The Deputy Safeguarding Leads in this school are: Anna Hayes  
Jessica Barnard  
Amy Wayne

1.1 West Sussex Young People's Service: Young People's Access Point (CAP)  
Tel: 01403 229900  
Fax: 01403 754205  
[cap@westsussex.gcsx.gov.uk](mailto:cap@westsussex.gcsx.gov.uk)

West Sussex Multi-Agency Integrated Front Door (Formerly MASH).  
Tel: 01403 229900 (Out of hours) 0330 222 6664  
[WSChildrenservices@westsussex.gov.uk](mailto:WSChildrenservices@westsussex.gov.uk)

1.2 Referrals can be made on web-based forms which can be accessed  
<https://www.westsussex.gov.uk/education-children-and-families/keeping-children-safe/raise-a-concern-about-a-child/>

Brighton & Hove City Council, Front Door for Families.  
Tel: 01273 290 400  
Email

East Sussex County Council, Front Door Referrals.  
Tel: 01273 337 660  
Email

1.3 Referrals for those aged 18 and over

1. To discuss concerns relating to a person aged 18 and over please contact West Sussex Adult Social Care on 01243 642121.

2. Referral to adult's social care should be made using the Adult Social Care Referral Form on-line form.

1.4 Local Authority Designated Officers (LADO):

West Sussex Local Authority Designated Officer (LADO)  
[LADO@westsussex.gov.uk](mailto:LADO@westsussex.gov.uk) Tel: 0330 222 6450

East Sussex Local Authority designated Officer (LADO)  
[ESSCP.Contact@eastsussex.gov.uk](mailto:ESSCP.Contact@eastsussex.gov.uk) Tel: 01273 481544

Brighton & Hove Local Authority designated Officer (LADO)  
[LADOenquiries@brighton-hove.gov.uk](mailto:LADOenquiries@brighton-hove.gov.uk) Tel: 01273 290400

1.5 Safeguarding in Education Team

The Safeguarding in Education Team, including the MASH Education Advisers, can be

contacted on 0330 222 4030 or by email to  
[Safeguarding.Education@westsussex.gov.uk](mailto:Safeguarding.Education@westsussex.gov.uk)

## **2. Introduction**

1. Safeguarding children and child protection applies to all children up to the age of 18.
2. For those aged 18 and over please see [part 14 of the schools safeguarding guidebook](#).
3. We recognise that Keeping Children Safe in Education 2023 applies to post 16 education as set out in Education and Training (Welfare of Children) Act 2021
4. Safeguarding is the action taken to promote the welfare of children and protect them from harm.
5. Safeguarding means:
  - protecting children from maltreatment
  - preventing the impairment of children's mental and physical health or development
  - ensuring that children grow up in circumstances consistent with the provision of safe and effective care, and
  - taking action to enable all children to have the best outcomes.
6. Child protection is part of the safeguarding process. It focuses on protecting individual children identified as suffering from, or likely to suffer, significant harm.

This includes child protection procedures which detail how to respond to concerns about a child.
7. We recognise that harm also means where a child or young person witnesses harm to another.
8. Safeguarding children is everyone's responsibility. Everyone who comes into contact with children and families has a role to play.
9. The purpose of this policy is to inform staff, parents, volunteers, ancillary and supply staff about Brighton Forward's responsibilities for safeguarding children and young people and to enable everyone to have a clear understanding of how these responsibilities should be carried out.
10. We recognise that all adults, including temporary staff, volunteers, ancillary and supply staff, have a full and active part to play in protecting children from harm and that the child's welfare is our paramount concern.
11. All staff members believe that our college should provide a caring, positive, safe and stimulating environment that promotes the social, physical and moral development of the individual child and young person.
12. We will also empower and support our staff where they have concerns for the safety of children and young people who do not attend our college.

### 3 SAFEGUARDING CULTURE IN OUR COLLEGE

#### 3.1 Child Protection Statement

Brighton Forward takes its responsibility to safeguard children and young people extremely seriously and this college will train and empower all staff to recognise and respond effectively to protect a child or young person who may be at risk of significant harm.

#### 3.2 It could happen here

We will ensure that all staff members in our college maintain an attitude of 'it could happen here' and feel able to raise concerns either about a child or young person at risk or a member of staff whose behaviour may present a risk to a child or young person.

#### 3.3 Our college will

1. Have safeguarding at the heart of everything we do.
2. We will maximise opportunities to hear the voice of all of our children and young people and do all we can to understand their lived experience.
3. Maximise opportunities to teach our children and young people how to keep safe both in the real and virtual world.
4. Support the child and young person's development in ways that will foster security, confidence and independence.
5. Provide an environment in which children and young people feel safe, secure, valued, respected and confident.
6. Recognise where children and young people have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. We also recognise it is key that staff are aware of how these children's experiences, can impact on their mental health, behaviour, and education
7. Ensure that **ALL of our children and young people know a member of staff they can communicate with if they are worried about something.**
8. Where there is a safeguarding concern, proprietors and college leaders should ensure the child and young person's wishes and feelings are taken into account when determining what action to take and what services to provide. Systems should be in place for children and young people to express their views and give feedback. Ultimately, all systems and processes should operate with the best interests of the child and young person at heart.
9. Make sure all our staff, including volunteers know how to contact child protection agencies should they need to.
10. Provide a systematic means of monitoring children and young people known or thought to be at risk of harm, and ensure we, the college, contribute to assessments of need and support packages for those children and young people.
11. Emphasise the need for good levels of communication between all members of staff and between the college and other agencies.
12. Have and regularly review, a structured procedure within the college which will be followed by all members of the college community in cases of suspected abuse.
13. Develop and promote effective working relationships with other agencies, especially the Police and Children's Social Care, including Integrated Prevention & Early Help.
14. Part of promoting effective working relationships, we are aware of the requirement for children and young people to have an Appropriate Adult present in certain circumstances involving the police – for example, during searches. We will be

aware of Statutory guidance - PACE Code C 2019 – and ensure our children and young people are supported as appropriate.

15. Ensure that all adults, including supply staff, contractors and volunteers, within our college who have access to children and young people have been recruited and checked as to their suitability in accordance with Part 3 of Keeping Children Safe in Education.

16. Have in place, other, up to date policies which support safeguarding.

17. Make sure all staff are aware of the systems within college which support safeguarding. We will explain this on induction together by sharing details of this policy, behaviour policy, staff behaviour policy, the school response to children who go missing from education, and role of the Designated Safeguarding Lead.

18. Whether in respect of child-on-child abuse or any other safeguarding situation, ALL of OUR STAFF will reassure the young person who reports any concerns, that they will be taken seriously and kept safe. OUR STAFF WILL NEVER give a young person the impression they are creating a problem by reporting abuse, sexual violence or sexual harassment nor should a young person ever be made to feel ashamed for making a report.

19. Our staff will also understand that the location of where the incident took place will feature in any risk assessments.

20. Our staff will also recognise the need to support siblings of all of those involved in any child-on-child sexual violence or harassment.

### **3.4 Voice of the Child – Working Together to Safeguard Children 2018**

Our college recognises the findings in Working Together to Safeguard Children 2018, where children expressed that they wanted an effective safeguarding system to be:

- vigilant: to have adults notice when things are troubling them
- understanding and actioned: to understand what is happening; to be heard and understood; and to have that understanding acted upon
- stable: to be able to develop an ongoing stable relationship of trust with those helping them
- respectful: to be treated with the expectation that they are competent rather than not
- informed and engaged: to be informed about and involved in procedures, decisions, concerns and plans
- explained: to be informed of the outcome of assessments and decisions and reasons when their views have not met with a positive response
- supported: to be provided with support in their own right as well as a member of their family
- advocated: to be provided with advocacy to assist them in putting forward their views
- protective: to be protected against all forms of abuse and discrimination and the right to special protection and help if a refugee

We will use this information to support the training of our staff and review this and other policies as appropriate.

### **3.5 Children may not feel ready or know how to tell.**

All our staff should be aware that children and young people may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or

they may not recognise their experiences as harmful. For example, children and young people may feel embarrassed, humiliated, or being threatened. This could be due to their vulnerability, disability and/or sexual orientation or language barriers. This should not prevent staff from having a professional curiosity and speaking to the DSL if they have concerns about a child or young person. It is also important that staff determine how best to build trusted relationships with children and young people which facilitate communication.

### **3.6 Extra-familial abuse**

All of our staff, but especially the designated safeguarding lead (and deputies) should consider whether children and young people are at risk of abuse or exploitation in situations outside their families. Extra-familial harms take a variety of different forms and children and young people can be vulnerable to multiple harms including (but not limited to) sexual abuse (including harassment and exploitation), domestic abuse in their own intimate relationships (teenage relationship abuse), criminal exploitation, serious youth violence, county lines, and radicalisation.

## **4 STATUTORY FRAMEWORK**

Our college will act in accordance with the following Government legislation and guidance.

### **4.1 Government legislation and guidance.**

- The Children Act 1989  
<https://www.legislation.gov.uk/ukpga/1989/41/contents>
- The Children Act 2004  
<https://www.legislation.gov.uk/ukpga/2004/31/contents>
- Education Act 2002  
<https://www.gov.uk/government/publications/relationships-education-relationships-and-sex-education-rse-and-health-education/about-this-guidance>
- Keeping Children Safe in Education 2024  
<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>
- Sexual Violence and sexual harassment between children in schools and colleges 2021:  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/999239/SVSH\\_2021.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/999239/SVSH_2021.pdf)
- Teaching online safety in school (DfE June 2019)  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/811796/Teaching\\_online\\_safety\\_in\\_school.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/811796/Teaching_online_safety_in_school.pdf)
- Working Together to Safeguard Children 2018:  
<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>
- Regulated Activity in relation to children: scope  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/550197/Regulated\\_activity\\_in\\_relation\\_to\\_children.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/550197/Regulated_activity_in_relation_to_children.pdf)
- The Education (Child Information) (England) Regulations 2005  
<https://www.legislation.gov.uk/uksi/2005/1437/contents>
- Prevent Duty for England and Wales (2015) under section 26 of the Counter-Terrorism and Security Act 2015  
<https://www.gov.uk/government/publications/prevent-duty-guidance>

- Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015)  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/573782/FGM\\_Mandatory\\_Reporting\\_\\_\\_procedural\\_information\\_nov16\\_FINAL.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/573782/FGM_Mandatory_Reporting___procedural_information_nov16_FINAL.pdf)
- Dealing with Allegations of Abuse against Teachers and Other Staff (2012)  
<https://www.gov.uk/government/publications/allegations-of-abuse-against-teachers-and-non-teaching-staff>
- Children Missing Education  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/550416/Children\\_Missing\\_Education\\_statutory\\_guidance.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/550416/Children_Missing_Education_statutory_guidance.pdf)
- West Sussex Safeguarding Children Partnership and Pan-Sussex safeguarding procedures West Sussex Safeguarding Children Partnership
- The Right to Choose – what services and organisations should do to help people at risk of forced marriage. <https://www.gov.uk/government/publications/the-right-to-choose-government-guidance-on-forced-marriage/multi-agency-12-statutory-guidance-for-dealing-with-forced-marriage-and-multi-agency-practice-guidelines-handling-cases-of-forced-marriage-accessible>
- Searching, screening and confiscation  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/674416/Searching\\_screening\\_and\\_confiscation.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/674416/Searching_screening_and_confiscation.pdf)
- The Equality Act 2010 and schools  
<https://www.gov.uk/government/publications/equality-act-2010-advice-for-schools> & <https://www.equalityhumanrights.com/en/advice-and-guidance/public-sector-equality-duty>

## **5 CONFIDENTIALITY**

### **5.1 Our College will:**

As a general principle, all matters relating to child protection are confidential and

1. should only be shared on a 'need-to-know' basis.
2. The Managing Director or Designated Safeguarding Lead will disclose any child or young person protection related information about a child or young person to other members of staff on a need-to-know basis only, where the receiving member of staff can play an active role in safeguarding that child or young person or supporting their education outcomes.
3. All staff must be aware that they have a professional responsibility to share
4. information with other agencies in order to safeguard children and young people.
5. All staff must be aware that they cannot promise a child or young person to keep secrets if doing so might compromise that or another child's or young person's safety or wellbeing.
6. The intention to refer a child to Children's Social Care will be shared with parents /carers unless to do so could put the child or young person at greater risk of harm or impede a criminal investigation. If in doubt, advice should be sought from the Integrated Front Door.
7. KCSiE very clearly outlines the expectations on our Designated Safeguarding Lead (DSL) in promoting the educational outcomes for children and young people by sharing information about the welfare, safeguarding and child protection issues that children and young people, including children with a social worker, are experiencing, or have experienced. Brighton Forward will follow this guidance.
  - a) KCSiE outlines that the DSL will share information with staff, so they know who these children or young people are, understand their academic progress

and attainment and maintain a culture of high aspirations for this cohort. Our college will support teaching staff to identify the challenges that children and young people in this group might face and the additional academic support and adjustments that they could make to best support these children and young people.

b) Our college will approach sharing of such information sensitively, in collaboration with the child or young person, parents and carers. When supporting the educational outcomes for a child or young person staff may need to know that the child or young person is or has been supported by safeguarding agencies, but it will often not be necessary to share the details of the actual safeguarding concerns.

## **6 RESPONSIBILITIES**

### **6.1 Our College**

As a college we recognise staff have a vital role to play in safeguarding children and young people because staff can identify concerns early, provide help for children and young people, and prevent these concerns escalating. We also recognise that ALL staff have a responsibility to provide a safe environment in which children and young people can learn.

### **6.2 We will**

1. Ask our children and young people what they want from an effective protection system.
2. Establish and maintain an environment where children and young people feel secure, are encouraged to talk and are listened to.
3. Be aware of the signs of abuse and maintain an attitude of "it could happen here" with regards to child protection.
4. Ensure that children and young people know that there are adults in the college whom they can approach if they are worried about anything, whether in college, at home, or in general.
5. Ensure all staff will know what to do if a child or young person tells them they are being abused or neglected.
6. Ensure that all staff will know how and where to record their concerns and report these to the Designated Safeguarding Lead, as soon as possible.
7. If a child or young person is in immediate danger, know how to refer the matter to the Integrated Front Door and/or the police immediately.
8. Support children and young people in line with their Child Protection Plan and notify the Designated Safeguarding Lead of any child on a Child Protection Plan who has an unexplained absence.
9. Actively plan opportunities within the programme for children and young people to develop the skills they need to assess and manage risk appropriately and keep themselves safe.
10. Be aware of and follow the Sussex Child Protection & Safeguarding Procedures, produced by West Sussex, East Sussex, and Brighton & Hove. This will include the referral process.
11. Have read and understand Part 1 of Keeping Children Safe in Education September 2024 (or for staff not working directly with children, the condensed version of part 1 found at Annex A of KCSiE) and be alert to signs of abuse and know to whom they should report any concerns or suspicions.
12. Participate in safeguarding training as part of our induction process.
13. Ensure all staff receive safeguarding and child protection updates as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children and young people.

14. Ensure that they know who the Designated and Deputy Safeguarding Lead(s) is/are and how to contact them.
15. Be aware of the 'early help' process and understand their role in it. This includes identifying problems and working effectively with other agencies that provide support to children and young people.
16. Immediately refer to the Managing Director if they have concerns about another member of staff.
17. Immediately refer to the Local Authority Designated Officer (LADO) where the concerns are about the Managing Director.
18. That all staff, including volunteers, will, where a child or young person is suffering, or is likely to suffer from harm, recognise it is important that a referral to local authority children's social care (and if appropriate the police) is made immediately. Referrals should follow the local referral process.

### **6.3 Child Protection Policy & Procedure**

1. We will make sure the safeguarding policies & procedures in the college are always effective and comply with the law. This will include a Child Protection Policy which is reviewed at least annually and is made available publicly, either on-line or by other means.
2. We will ensure our child protection policy:
  - Reflects the whole college approach to child-on-child abuse reflects reporting systems
  - Describes procedures which are in accordance with government guidance
  - Includes policies as reflected elsewhere in Part two of KCSiE 2024 where appropriate, reflects serious violence.
  - Is reviewed annually (as a minimum) and updated if needed, so that it is kept up to date with safeguarding issues as they emerge and evolve, including lessons learnt.

### **6.4 Attendance Policy & Safeguarding Policy**

1. A policy which puts in place appropriate safeguarding responses to children and young people who do not attend or go missing during the school day or who are children missing education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual abuse or exploitation, and to help prevent the risk of them going missing in future.
2. Where reasonably possible, our school will hold more than one emergency contact number for each student. This goes beyond the legal minimum, but we recognise that it is good practice for our college to have additional options to make contact with a responsible adult when a child or young person goes missing from education, or who does not attend or goes missing from college, is also identified as a welfare and/or safeguarding concern.
3. Our college will always take immediate steps to safeguard a vulnerable child. For example, an inability to make contact with a parent / carer despite immediate and repeated efforts will not impede urgent safeguarding action, for example calling the police for a child or young person who is at risk and has gone missing during the college day.

### **6.5 Staff Behaviour Policy**

1. We will have in place a Staff Code of Conduct which, amongst other things, includes acceptable use of technologies staff/student relationships and communications including the use of social media.

2. This will include how the college manages low level concerns.

## **6.6 Appointing a Designated Safeguarding Lead & Deputies**

1. Appointing a Designated Safeguarding Lead who is a senior member of staff from **our leadership team**, who has responsibility for safeguarding and child protection.

## **6.7 Audits and Review – including Peer Reviews**

1. Through regular review and audit, ensure that any safeguarding deficiencies or weaknesses within the college are remedied without delay.
2. Our college will also consider whether a peer review by another school/college or an audit of our safeguarding provision would be of benefit.

## **6.8 Child Protection Records**

Ensuring that child protection records are maintained in accordance with KCSiE 2024, are kept securely and separately from other records, in accordance with GDPR, and are only accessed by staff that need to.

## **6.9 Allegations against teachers, other staff, including supply teachers and volunteers**

1. The management are aware of their duties under Part Three and Part Four, Keeping Children Safe in Education 2022 – safer recruiting and managing allegations made against teachers, other staff, including supply teachers and volunteers.
2. The management are aware of the new guidance within KCSiE regarding low level concerns.
3. We recognise that our duties relate to members of staff, supply staff and volunteers who are currently working in any school or college regardless of whether the school or college is where the alleged abuse took place.
4. We are aware of our responsibilities in respect of supply teachers, as outlined in part 3 of Keeping Children Safe in Education 2024.
5. We are aware that allegations against a teacher who is no longer teaching should be referred to the police. Historical allegations of abuse should also be referred to the police.
6. We will ensure that there are procedures in place to effectively manage allegations against all staff members, including low level concerns.
7. We will train our staff to enable them to raise concerns and, as a college, we will follow the guidelines outlined in Part 4 of Keeping Children Safe in Education 2024.
8. Our college will refer cases to the Local Authority Designated Officer (LADO) where a member of staff, supply or agency staff or volunteer has, either inside or outside of college:
  - i. behaved in a way that has harmed a child, or may have harmed a child;
  - ii. possibly committed a criminal offence against or related to a child;
  - iii. behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children; or
  - iv. behaved or may have behaved in a way that indicates they may not be suitable to work with children.
9. All such cases, and in cases of any doubt as to whether the matter reaches

10. threshold for an allegation, advice and guidance must be sought from the LADO BEFORE any internal investigation begins.
11. For further information on how we will respond to any such allegations see section 13 below.

#### **6.10 Other areas of note**

1. Ensuring that we discharge our responsibilities as proprietors in respect adhering to the reporting restrictions imposed by the Education Act 2002 where teachers are under investigation.
2. As proprietors we will also ensure parents and carers are aware of their responsibilities not to publish any information during such investigations as highlighted in paragraph 388 of Keeping Children Safe in Education 2024 and section 141F of the Education Act 2002.
3. Making sure all staff are familiar with the contents of Part 1 or Annex A of Keeping Children Safe in Education 2024 and that all staff have been trained appropriately, frequently and in line with statutory guidance.
4. By making sure any staff training includes how local services work together to safeguard children and how our school safeguarding leads and deputies work with the safeguarding partnership and other agencies as outlined in Working Together to Safeguard Children to keep children safe.
5. Ensuring that the college is contributing to inter-agency working, which includes engaging with our local Early Help hub in a coordinated manner to provide support to our children and young people as soon as needs are identified.
6. When considering our responsibility to safeguard and promote the welfare of children and young people and provide them with a safe environment in which to learn, we recognise proprietors should be doing all that they reasonably can to limit children and people's exposure to the above risks from the college's IT system.
7. As part of this process, proprietors should ensure their college has appropriate filters and monitoring systems in place and regularly review their effectiveness. They should ensure that the leadership team and relevant staff have an awareness and understanding of the provisions in place and manage them effectively and know how to escalate concerns when identified.
8. Proprietors should consider the age range and number of their children and young people, and how often they access the IT system and the proportionality of costs verses safeguarding risks.
9. For e-learning, making sure that appropriate filters and appropriate monitoring systems are in place to safeguard against potentially harmful and inappropriate online material. By working with parents and carers in making sure that appropriate filters and appropriate monitoring systems are in place whilst the children and young people are accessing the internet at home, to safeguard against potentially harmful and inappropriate online material.

#### **6.11 Our college recognises the statutory status of Relationship Education, Relationship and Sex Education and Health Education from September 2020.**

1. As a college we welcome this along with the opportunity to teach our students about safeguarding including online, through teaching and learning opportunities and as part of providing a universal broad and balanced programme.
2. The programme ensures that children and young people are taught about how to keep themselves and others safe, including online. The programme tailored to the specific needs and vulnerabilities of individual children and young people,

including children who are victims of abuse, and children and young people with special educational needs or disabilities.

3. In college, relevant topics will be included within Relationships and Sex Education and Health Education.
4. College plays a crucial role in preventative education in the context of a whole-college approach that prepares students for life in modern Britain and creates a culture of zero tolerance for sexism, misogyny/misandry, homophobia, biphobic and sexual violence/harassment. The college will have a clear set of values and standards, upheld and demonstrated throughout all aspects of college life. These will be underpinned by the college's behaviour policy and pastoral support system, as well as by a planned programme of evidence-based RSHE delivered in regularly timetabled sessions and reinforced throughout the whole programme.

This programme will tackle at cognitive ability stage issues such as:

- i. healthy and respectful relationships
- ii. boundaries and consent
- iii. stereotyping, prejudice and equality
- iv. body confidence and self-esteem
- v. how to recognise an abusive relationship, including coercive and controlling behaviour
- vi. the concepts of, and laws relating to- sexual consent, sexual exploitation, abuse, grooming, coercion, harassment, rape, domestic abuse, so called honour-based violence such as forced marriage and Female Genital Mutilation (FGM), and how to access support, and
- vii. what constitutes sexual harassment and sexual violence and why these are always unacceptable.

## **6.12 Training**

1. The Managing Director will ensure they and all college staff, including volunteers, are trained at least annually in respect of safeguarding.

## **6.13 Safer Recruiting**

1. The leadership team will ensure the college creates a culture of safer recruitment and as part of that adopt recruitment procedures that help deter, reject or identify people who might abuse children.
2. Brighton Forward will follow the procedures set out in Part 3: Safer Recruitment, Keeping Children Safe in Education, September 2024. This includes taking up references for each shortlisted candidate and ensuring that at least one member of any appointing panel will have attended safer recruitment training.

## **6.14 Single Central Record**

1. We will ensure that our college maintains a single central record in line with Part 3, of Keeping Children Safe in Education 2024.
2. We will remind all staff, at least annually, that they must, straightaway, bring to the attention of the Managing Director any material changes in circumstances or other information of relevance.
3. For supply teachers, we are aware that we must obtain written notification from any agency, or third-party organisation who we are using, that the organisation has carried out the checks (in respect of the enhanced DBS certificate, written notification that confirms the certificate has been obtained by either the employment business or another such business), on an individual who will be working at our college.

4. Where any supply position requires a barred list check, we recognise that this must be obtained by the agency or third party prior to our college appointing the individual.
5. We are aware of the checks that must be undertaken for trainee or student teachers, and will make sure, depending on circumstances, that either the college or training provider will undertake all relevant checks.
6. Our college will always check that the person presenting themselves for work from a supply or other agency is the same person on whom the checks have been made.
7. If there is any doubt that all relevant checks have not been completed then the person whom the checks relate to will not be allowed to engage in any regulated activity at our college.

### **6.15 Disclosure and Barring Referrals**

1. We recognise that our college has a legal duty in making a referral regarding anyone who has harmed, or poses a risk of harm, to a child or vulnerable adult where:
  - a. The harm test is satisfied in respect of that individual;
  - b. The individual has received a caution or conviction for a relevant offence, or if there is reason to believe that the individual has committed a listed relevant offence; and
  - c. The individual has been removed from working (paid or unpaid) in regulated activity or would have been removed had they not left.
2. We recognise that this is a legal duty for our college and failure to refer when the criteria are met is a criminal offence.

### **6.16 Resignations and Settlement Agreements**

1. Our college recognises that if the accused person resigns, or ceases to provide their services, this should not prevent an allegation being followed up in accordance with this policy and the guidance contained in Part Four of KCSiE 2024.
2. A referral to the DBS must be made if the criteria are met.
3. We also recognise we must consider whether a referral to the Secretary of State, through a referral to the Teacher Regulation Authority <https://www.gov.uk/guidance/teacher-misconduct-referring-a-case> as appropriate.
4. If the accused person resigns or their services cease to be used, and the criteria are met for a referral to DBS it will not be appropriate to reach a settlement/compromise agreement. We recognise that any settlement/compromise agreement that would prevent a college from making a DBS referral even though the criteria for referral are met, is likely to result in a criminal offence being committed. This is because the college would not be complying with its legal duty to make the referral.
5. The Managing Director recognises it is important that every effort is made to reach a conclusion in all cases of allegations bearing on the safety or welfare of children and young people, including any in which the person concerned refuses to cooperate with the process. Wherever possible, the accused should be given a full opportunity to answer the allegation and make representations about it. But the process of recording the allegation and any supporting evidence and reaching a judgement about whether it can be substantiated based on all the information available, should continue even if that cannot be done or the accused does not cooperate. It may be difficult to reach a conclusion in those circumstances, and it may not be possible to apply any disciplinary sanctions if a person's period of notice expires before the process is complete, but it is important to reach and record a conclusion wherever possible.
6. 'Settlement agreements' (sometimes referred to as compromise agreements), by which a person agrees to resign if the employer agrees not to pursue disciplinary action, and both parties agree a form of words to be used in any future reference,

should not be used in cases of refusal to cooperate or resignation before the person's notice period expires. Such an agreement will not prevent a thorough police investigation where that is appropriate.

7. We will take advice from external legal services where necessary.

### **6.17 Consideration of referral to the Secretary of State – Teaching Regulation Agency**

1. We recognise that in any case concerning the dismissal or where we cease to use the services of a teacher because of serious misconduct or might have dismissed them or ceased to use their services had they not left first, we must consider whether to refer the case to the Secretary of State (via the Teaching Regulation Agency). Details about how to make a referral to the Teaching Regulation Agency can be found on <https://www.gov.uk/guidance/teacher-misconduct-referring-a-case>

2. We will take advice from external legal services where necessary.

### **6.18 Ongoing vigilance**

1. We recognise that we should ensure we have processes in place for continuous vigilance, maintaining an environment that deters and prevents abuse and challenges inappropriate behaviour.

2. To support this, the college leaders create the right culture and environment so that staff feel comfortable to discuss matters both within, and where it is appropriate, outside of the workplace, which may have implications for the safeguarding of children and young people. This can assist employers to support staff, where there is a need, and help them manage children's and young people's safety and welfare, potentially providing them with information that will help them consider whether there are further measures or changes to procedures that need to be put in place to safeguard children and young people in their care.

### **6.19 Existing staff**

1. There are limited circumstances where Brighton Forward will need to carry out new checks on existing staff. These are when:

- a. an individual working at the college moves from a post that was not regulated activity with children and adults into work which is considered to be regulated activity with children and adults. In such circumstances, the relevant checks for that regulated activity **must** be carried out;
- b. there has been a break in service of 12 weeks or more; or
- c. there are concerns about an individual's suitability to work with children.

2. For colleges, an individual moving from a position that did not involve the provision of education to one that does, **must** be treated as if that individual were a new member of staff and all required pre-appointment checks **must** be carried out.

### **6.20 Use of college premises for non-college activities**

1. We recognise that the hire or rent out of college facilities/premises to organisations or individuals (for example to community groups, sports associations, and service providers to run community or extra-curricular activities) the Managing Director should ensure that appropriate arrangements are in place to keep children and young people safe.

2. When services or activities are provided by the Managing Director, under the direct supervision or management of their college staff, our normal arrangements for child

protection will apply. However, where services or activities are provided separately by another body this is not necessarily the case. The Managing Director should therefore seek assurance that the body concerned has appropriate safeguarding and child protection policies and procedures in place (including inspecting these as needed); and ensure that there are arrangements in place to liaise with the school or college on these matters where appropriate. The Managing Director recognises that the college should also ensure safeguarding requirements are included in any transfer of control agreement (i.e., lease or hire agreement), as a condition of use and occupation of the premises; and that failure to comply with this would lead to termination of the agreement.

### **6.21 Our students attending alternative provision**

Where any of our young people attend any alternative provision:

1. We will ensure the alternative provision has undertaken all relevant safer recruitment checks required for their staff and have confirmed that in writing to us
2. Have appropriate policies in place to keep our children and young people safe whilst attending and have shared those policies with us where necessary
3. Record that we have made these enquiries before our young person attends.

We will also ensure continued safeguarding of our student:

- a. That we maintain regular contact with the alternative provider regarding any ongoing or new safeguarding concerns
- b. Record specifically who is taking action to keep the child safe
- c. Who is monitoring, what that looks like and how often.
- d. Attendance and who will respond when the student is absent.
- e. That any risk assessment is completed before our student attends – for example, exploitation risks for the child / young person using the train to travel some distance to the alternative provider.
- f. That a – e above are reviewed regularly and who is responsible for doing that.

### **6.22 Professional Disagreements & Concerns**

We recognise that, on occasions, there are disagreements between safeguarding professionals. Should any such situations arise in our college, we will always keep the child and young person at the centre, and we will support the children, young person and staff in our college by ensuring that our college follow the correct procedure should it be necessary to escalate concerns to the safeguarding children partnership.

<https://www.westsussexscp.org.uk/professionals/professional-disagreements-and-concerns>

## **7 THE DESIGNATED SAFEGUARDING LEAD (DSL)**

In this college, any individual can contact the Designated Safeguarding Lead if they have concerns about a child or young person.

**The Designated Safeguarding Lead is Laura Vallone since 01/01/2021**

**The Deputy Safeguarding Leads are Anna Hayes since 01/09/2023, Jessica Barnard since 01/09/2023 and Amy Wayne (maternity cover) since 02/09/2024**

## 7.1 The Designated Safeguarding Lead

1. We recognise Keeping Children Safe in Education (KCSiE) 2024, Annex C, gives an overview of the role of the DSL.
2. The Designated Safeguarding Lead and Deputies within our college will have the role explicitly stated in their job description. Should they take on the role whilst in service a letter confirming this will be sent to the individual.
3. The Safeguarding Lead will:
  - a. Attend initial training for their role and refresh this within two years.
  - b. Keep their knowledge and skills updated at least annually.
  - c. Ensure that all staff know who the Designated Safeguarding Lead is, their role and how to make contact.
  - d. Ensure that all staff understand their responsibilities in relation to signs of abuse and responsibility to refer any concerns to the Designated Safeguarding Lead. In addition, the Designated Safeguarding Lead should ensure that all staff read and understand Part 1 of Keeping Children Safe in Education 2020 and have a record of when this was done.
  - e. The DSL will pay particular attention to training staff and volunteers who have been unable to attend whole-school safeguarding training days and make sure they receive training as soon as possible, and whether the staff member / volunteer should be supervised in the interim or have any probation period extended.
  - f. Ensure that new staff participate in safeguarding training as part of their induction.
  - g. Ensure that all staff receive safeguarding and child protection updates as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children. The Designated Safeguarding Lead will also ensure staff, including all senior leaders are kept fully aware of any significant changes or updates to local authority child protection and safeguarding procedures, as and when they occur.
  - h. Be the lead for the college when engaging the managing professional difference protocol when there is disagreement between the college and other agencies in respect of action taken to keep a child safe. Found <https://www.westsussexscp.org.uk/professionals/professional-disagreements-and-concerns>
  - i. Help promote educational outcomes by sharing the information about the welfare, safeguarding and child protection issues that children, including children with a social worker, are experiencing, or have experienced, with teachers and college and college leadership staff.
  - j. Liaise with relevant programme leads in setting to ensure Relationship Education, Relationship and Sex Education and Health Education is considered within all aspects of the programme.
  - k. Maintain child and young person protection records for each child and young person where concerns have been raised and ensure the receiving school or college is informed of any concerns and files are transferred when the child or young person moves to another educational setting.
  - l. During term time the designated safeguarding lead will be available (during college hours) for staff in the college to discuss any safeguarding concerns.
  - m. The designated safeguarding lead (or deputy) will be expected to be available in exceptional circumstances via phone, TEAMS or other such media is acceptable to Brighton.
  - n. Safeguarding lead will ensure that we provide the Local Authority with up-to-date emergency contact details should the Local Authority need to discuss an urgent safeguarding matter/issue/concern when college is closed.

## **7.2 The Designated Safeguarding Lead is expected to:**

1. Refer cases of suspected abuse to the IFD or other Local Authority Children's Social Care services as appropriate. Where a referral is made that notes are completed that same day.
2. Support staff who make referrals to IFD or other Local Authority Children's Social Care.
3. For open cases, where a child or young person already has an allocated social worker, to refer any new concerns immediately to the allocated social worker.
4. For all child protection conferences, ensure reports are generated and shared ahead of the conference and in line with West Sussex Safeguarding Partnership expectations.
5. Refer cases to the Channel programme where there is a radicalisation concern, as required.
6. Support staff who make referrals to the Channel programme.
7. Refer cases where a person is dismissed or left due to risk/harm to a child or young person to the Disclosure and Barring Service as required.
8. Refer cases where a crime may have been committed to the police, either directly or via the IFD as required.
9. Ensure all child protection files are kept separately and securely from other records and accessible only by staff that need to access them for safeguarding purposes.
10. As required, liaise with the Case Manager and where required the LADO, in all cases involving allegations against members of staff (both current and former members of staff).
11. Liaise with staff on matters of safety and safeguarding (including online and digital safety) and when deciding whether to make a referral by liaising with relevant agencies.
12. To retain oversight of all Early Help plans, and review level or any change in risk at regular intervals.
13. Act as a source of support, advice and expertise for staff.

## **7.3 Training**

1. As well as training all members of staff as above, the DSL and deputies should undergo training to provide them with the skills required to carry out the role. This training will be updated at least every two years.
2. The DSL and deputies should undertake PREVENT Awareness training and ensure the rest of the staff also do this on at least an annual basis as part of the wider continuous safeguarding training process in operation.

## **7.4 Designated Safeguarding Lead – continual professional development**

1. The DSL should be afforded time to allow them to keep up to date with any developments relevant to their role, including:
2. Assist all staff to recognise that changes in behaviour can indicate potential abuse or neglect or be as a result of previous or current trauma, experienced by the child or young person directly or being in the presence of others who have / are experiencing trauma.
3. Understanding the assessment process for providing Early Help and intervention and ensure the college engages in Early Help consultations with the appropriate member of staff.

4. Maintaining a working knowledge of how Local Authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively, when required to do so.
5. Ensuring each member of staff has access to and understands the college's child protection policy and procedures, especially new and part-time staff.
6. Being alert to the specific needs of children in need, those with special educational needs and young carers.
7. Have an understanding of the impact of a child's lived experiences on their presentation and ability to engage in learning. Identify appropriate learning opportunities for college staff to enable them to meet those individual needs and reflect on the college's policies and processes in light of what they have learned.
8. Keeping detailed, accurate, secure written records of concerns and referrals on the safeguarding section of the college's management information system and use these records to assess the likelihood of risk. The written records should clearly identify details of the concerns and what action was taken. If these are stored electronically, they must be password protected from the student's other files and accessible only by the Head/DSL and deputy DSLs.
9. Supporting the college with regards to the requirements of the PREVENT Duty and are able to provide advice and support to staff on protecting children from the risk of radicalisation.
10. Having knowledge of changes to local safeguarding procedures, processes, assessment tools etc and obtaining access to resources and attend any relevant or refresher training courses.
11. Encouraging a culture of listening to children and young people and taking account of their wishes and feelings among all staff, in any measures the college may put in place to protect them.
12. Understand the importance of information sharing, both within the college, and with the three safeguarding partners, other agencies, organisations and practitioners.
13. Ensuring that where a student transfers to a college and is on a Protection Plan or is a Child Looked After, the information is passed to the new college immediately and the student's social worker informed.
14. Acting as a source of support, advice and expertise to staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies.
15. Ensuring that either they or a deputy attends Child Protection conferences, core groups or other multi-agency planning meetings, contributes to assessments and provides a report which will normally have been shared with the parents ahead of the conference and in line with multi-agency requirements.
16. Ensuring that any child who is subject to a child protection plan and who is absent without explanation is referred to their key worker's social care team. In some cases, any absence may be a cause for concern and warrant immediate reporting.
17. Are able to understand the unique risks associated with online safety and be confident that they have the relevant knowledge and up to date capability required to keep children safe whilst they are online at school, college or at home.
18. Can recognise the additional risks that children and young people with SEN and disabilities (SEND) face online, for example, from online bullying, grooming and radicalisation and are confident they have the capability to support SEND children to stay safe online.
19. Ensuring the college's child protection policy is reviewed annually, ensuring that procedures are updated, implemented and reviewed regularly.
20. Being responsible for making the senior leadership team aware of trends in behaviour that may affect child welfare.

## **8 WHEN TO BE CONCERNED A CHILD IS AT RISK OF ABUSE**

### **8.1 We recognise that all children and young people are vulnerable to abuse.**

1. We will train all of our staff, including volunteers and ancillary staff, to recognise and report to the DSL immediately when they have concerns.
2. We will ensure that all of our staff, volunteers and ancillary staff have read Part 1 of KCSIE 2024, This Policy and have attended safeguarding training at least once per year.
3. Our college is determined that all staff and volunteers will be aware of the main categories of abuse and the signs and symptoms so they can respond quickly and effectively by informing the DSL immediately where there are concerns.

### **8.2 Types of Abuse**

#### **1. Abuse:**

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

#### **2. Physical Abuse:**

A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child.

#### **3. Emotional Abuse:**

The persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental ability as well as overprotection and limitation of exploration and learning or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child although it may occur alone.

#### **4. Sexual Abuse:**

Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

They may also include non-contact activities such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet) by establishing a close relationship or friendship. Sexual abuse is not solely perpetrated by adult males; women can also commit acts of sexual abuse as can other children.

## **5. Neglect**

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment), protect a child from physical and emotional harm or danger, ensure adequate supervision (including the use of inadequate care-givers), or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

## **8.3 Recognising Physical Abuse**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

### Indicators in the child

#### Bruising

It is often possible to differentiate between accidental and inflicted bruises. The following must be considered as non-accidental unless there is evidence, or an adequate explanation provided:

- bruising in or around the mouth
- two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental (though a single bruised eye can be accidental or abusive)
- repeated or multiple bruising on the head or on sites unlikely to be injured accidentally, for example the back, mouth, cheek, ear, stomach, chest, under the arm, neck, genital and rectal areas
- variation in colour possibly indicating injuries caused at different times
- the outline of an object used e.g., belt marks, handprints or a hairbrush
- linear bruising at any site particularly on the buttocks, back or face
- bruising or tears around or behind, the earlobe/s indicating injury by pulling or twisting
- bruising around the face
- grasp marks to the upper arms, forearms or leg
- petechial haemorrhages (pinpoint blood spots under the skin) commonly associated with slapping, smothering/suffocation, strangling and squeezing

#### Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint. It is unlikely that a child will have had a fracture without the carers being aware of the child's distress. If the child is not using a limb, has pain on movement and/or swelling of the limb, there may be a fracture.

There are grounds for concern if:

- the history provided is vague, non-existent or inconsistent

- there are associated old fractures
- medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement.

Rib fractures are only caused in major trauma such as in a road traffic accident, a severe shaking injury or a direct injury such as a kick.

Skull fractures are uncommon in ordinary falls, i.e., from three feet or less. The injury is usually witnessed, the child will cry and if there is a fracture, there is likely to be swelling on the skull developing over 2 to 3 hours. All fractures of the skull should be taken seriously.

#### Mouth Injuries

Tears to the frenulum (tissue attaching upper lip to gum) often indicates force feeding of a baby or a child with a disability. There is often finger bruising to the cheeks and around the mouth. Rarely, there may also be grazing on the palate.

#### Poisoning

Ingestion of tablets or domestic poisoning in children under 5 is usually due to the carelessness of a parent or carer but it may be self-harm even in young children.

#### Bite Marks

Bite marks can leave clear impressions of the teeth when seen shortly after the injury has been inflicted. The shape then becomes a more defused ring bruise or oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child. A medical/dental opinion, preferably within the first 24 hours, should be sought where there is any doubt over the origin of the bite.

#### Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds. Scalds are the most common intentional burn injury recorded. Any burn with a clear outline may be suspicious e.g., circular burns from cigarettes, linear burns from hot metal rods or electrical fire elements, burns of uniform depth over a large area, scalds that have a line indicating immersion or poured liquid.

Old scars indicating previous burns/scalds, which did not have appropriate treatment or adequate explanation. Scalds to the buttocks of a child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

The following points are also worth remembering:

- A responsible adult checks the temperature of the bath before the child gets in.
- A child is unlikely to sit down voluntarily in a hot bath and cannot accidentally scald its bottom without also scalding his or her feet.
- A child getting into too hot water of his or her own accord will struggle to get out and there will be splash marks.

#### Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, or unusually shaped, may suggest abuse.

#### Emotional / behavioural presentation:

- refusal to discuss injuries
- admission of punishment which appears excessive

- fear of parents being contacted and fear of returning home
- withdrawal from physical contact
- arms and legs kept covered in hot weather
- fear of medical help
- aggression towards others
- frequently absent from school
- an explanation which is inconsistent with an injury
- several different explanations provided for an injury

#### Indicators in the parent:

- may have injuries themselves that suggest domestic violence
- not seeking medical help/unexplained delay in seeking treatment reluctant to give information or mention previous injuries
- absent without good reason when their child is presented for treatment
- disinterested or undisturbed by accident or injury
- aggressive towards child or others
- unauthorised attempts to administer medication
- tries to draw the child into their own illness
- past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault
- parent/carer may be over involved in participating in medical tests, taking temperatures and measuring bodily fluids
- observed to be intensely involved with their children, never taking a much-needed break nor allowing anyone else to undertake their child's care.
- may appear unusually concerned about the results of investigations which may indicate physical illness in the child
- wider parenting difficulties may (or may not) be associated with this form of abuse
- parent/carer has convictions for violent crimes.

#### Indicators in the family/environment:

- marginalised or isolated by the community
- history of mental health, alcohol or drug misuse or domestic violence
- history of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

### **8.4 Recognising perplexing cases which may indicate a possibility of fabricated or Induced Illness (FII)**

1. Professionals may be concerned at the possibility of a child suffering significant harm as a result of having illness fabricated or induced by their carer. Possible concerns are:

- discrepancies between reported and observed medical conditions, such as the incidence of fits
- attendance at various hospitals, in different geographical areas
- development of feeding/eating disorders, as a result of unpleasant feeding interactions
- the child developing abnormal attitudes to their own health
- non-organic failure to thrive - a child does not put on weight and grow and there is no underlying medical cause
- speech, language or motor developmental delays

- dislike of close physical contact
- attachment disorders
- low self esteem
- poor quality or no relationships with peers because social interactions are restricted
- poor attendance at school and under-achievement.

2. These cases are very complex and for a case to be considered as FII is after careful and detailed review by a consultant paediatrician. Please see Pan-Sussex Child Protection Procedures for further information

<https://sussexchildprotection.procedures.org.uk/tkypss/children-in-specific-circumstances/fabricated-or-induced-illness-fii-and-perplexing-presentations-including-fii-by-carers>

## **8.5 Recognising Emotional Abuse**

1. Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person.

2. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

3. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning or preventing the child participating in normal social interaction.

4. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.

5. Some level of emotional abuse is involved in all types of maltreatment of a child though it may occur alone.

Indicators in the child:

- developmental delay
- abnormal attachment between a child and parent/carer e.g., anxious, indiscriminate or no attachment
- aggressive behaviour towards others
- child scapegoated within the family
- frozen watchfulness, particularly in pre-school children
- low self-esteem and lack of confidence
- withdrawn or seen as a 'loner' - difficulty relating to others
- over-reaction to mistakes
- fear of new situations
- inappropriate emotional responses to painful situations
- neurotic behaviour (e.g., rocking, hair twisting, thumb sucking)
- self-harm
- fear of parents being contacted
- extremes of passivity or aggression
- drug/solvent abuse
- chronic running away
- compulsive stealing
- low self-esteem
- air of detachment – 'don't care' attitude
- social isolation – does not join in and has few friends

- depression, withdrawal
- behavioural problems e.g., aggression, attention seeking, hyperactivity, poor attention
- low self-esteem, lack of confidence, fearful, distressed, anxious
- poor peer relationships including withdrawn or isolated behaviour

Indicators in the parent:

- domestic abuse, adult mental health problems and parental substance misuse may be features in families where children are exposed to abuse
- abnormal attachment to child e.g., overly anxious or disinterest in the child
- scapegoats one child in the family
- imposes inappropriate expectations on the child e.g., prevents the child's developmental exploration or learning, or normal social interaction through overprotection
- wider parenting difficulties may, or may not, be associated with this form of abuse

Indicators of in the family/environment:

- lack of support from family or social network
- marginalised or isolated by the community
- history of mental health, alcohol or drug misuse or domestic violence
- history of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

## 8.6 Recognising Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse.

## 8.7 Neglect - Using the West Sussex Partnership Neglect Suite of Tools

1. West Sussex Safeguarding Children Partnership have developed a range of tools to assist professionals in identifying and responding to neglect.

<https://www.westsussexscp.org.uk/professionals/neglect-and-abuse/neglect-tools-and-resources-new>

2. These tools include A Day in My Life Templates to enable professionals to assess the needs of individual children. These tools are fundamental in hearing the child's voice when there are concerns.

3. Brighton Forward is committed to using these tools when assessing impact of abuse and neglect on children.

Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate caregivers)
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. Indicators in the child

#### Physical presentation:

- failure to thrive or, in older children, short stature
- underweight
- frequent hunger
- dirty, unkempt condition
- inadequately clothed, clothing in a poor state of repair
- red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold
- swollen limbs with sores that are slow to heal, usually associated with cold injury
- abnormal voracious appetite
- dry, sparse hair
- recurrent/untreated infections or skin conditions e.g., severe nappy rash, eczema or persistent head lice/scabies/diarrhoea
- unmanaged / untreated health/medical conditions including poor dental health
- frequent accidents or injuries.

#### Development:

- general delay, especially speech and language delay
- inadequate social skills and poor socialization.

#### Emotional/behavioural presentation:

- attachment disorders
- absence of normal social responsiveness
- indiscriminate behaviour in relationships with adults
- emotionally needy
- compulsive stealing
- constant tiredness
- frequently absent or late at school
- poor self esteem
- destructive tendencies
- thrives away from home environment
- aggressive and impulsive behaviour
- disturbed peer relationships
- self-harming behaviour.

#### Indicators in the parent:

- dirty, unkempt presentation
- inadequately clothed
- inadequate social skills and poor socialisation
- abnormal attachment to the child e.g., anxious
- low self- esteem and lack of confidence
- failure to meet the basic essential needs e.g., adequate food, clothes, warmth, hygiene
- failure to meet the child's health and medical needs e.g., poor dental health; failure to attend or keep appointments with health visitor, GP or hospital; lack of GP registration; failure to seek or comply with appropriate medical treatment; failure to address parental substance misuse during pregnancy
- child left with adults who are intoxicated or violent
- child abandoned or left alone for excessive periods
- wider parenting difficulties may or may not be associated with this form of abuse.

#### Indicators in the family/environment:

- history of neglect in the family
- family marginalised or isolated by the community
- family has history of mental health, alcohol or drug misuse or domestic violence
- history of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- family has a past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement
- dangerous or hazardous home environment including failure to use home safety equipment, risk from animals
- poor state of home environment e.g., unhygienic facilities, lack of appropriate sleeping arrangements, inadequate ventilation (including passive smoking) and lack of adequate heating
- lack of opportunities for child to play and learn.

## **8.8 Recognising Sexual Abuse**

1. Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening.
2. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.
3. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet).
4. Sexual abuse is not solely perpetrated by adult males, women can also commit acts of sexual abuse, as can other children.

Indicators in the child

Physical presentation:

- urinary infections, bleeding or soreness in the genital or anal areas
- recurrent pain on passing urine or faeces
- blood on underclothes
- sexually transmitted infections
- vaginal soreness or bleeding
- pregnancy in a younger girl where the identity of the father is not disclosed and/or
- there is secrecy or vagueness about the identity of the father
- physical symptoms such as injuries to the genital or anal area, bruising to buttocks,
- abdomen and thighs, sexually transmitted disease, presence of semen on vagina,
- anus, external genitalia or clothing.

Emotional/behavioural presentation:

- makes a disclosure
- demonstrates sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit
- inexplicable changes in behaviour, such as becoming aggressive or withdrawn
- self-harm - eating disorders, self-mutilation and suicide attempts
- poor self-image, self-harm, self-hatred

- reluctant to undress for PE
- running away from home
- poor attention / concentration (world of their own)
- sudden changes in school work habits, become truant
- withdrawal, isolation or excessive worrying
- inappropriate sexualised conduct
- sexually exploited or indiscriminate choice of sexual partners
- wetting or other regressive behaviours e.g., thumb sucking
- draws sexually explicit pictures
- depression.

Indicators in the parents:

- comments made by the parent/carer about the child
- lack of sexual boundaries
- wider parenting difficulties or vulnerabilities
- grooming behaviour
- parent is a sex offender.

Indicators in the family/environment:

- marginalised or isolated by the community
- history of mental health, alcohol or drug misuse or domestic violence
- history of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- past history of childhood abuse, self-harm, or a culture of physical chastisement
- family member is a sex offender.

## 8.9 Preventing Radicalisation

**Note: This preventing radicalisation section remains under review, following the publication of a new definition of extremism on the 14 March 2024.**

1. As part of our **safeguarding** training our college we train all staff at least annually in respect of preventing radicalisation.
2. We recognise more information is contained within the schools safeguarding Guidebook and our Prevent Policy.
3. We recognise children are vulnerable to extremist ideology and radicalisation. Similar to protecting children from other forms of harms and abuse, protecting children and young people from this risk is part of our colleges' safeguarding approach.
4. Extremism is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces.
5. Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.
6. Terrorism is an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.
7. There is no single way of identifying whether a child or young person is likely to be susceptible to an extremist ideology. Background factors combined with specific

influences such as family and friends may contribute to a child's vulnerability. Similarly, radicalisation can occur through many different methods (such as social media or the internet) and settings (such as within the home).

8. However, it is possible to protect vulnerable people from extremist ideology and intervene to prevent those at risk of radicalisation being radicalised. As with other safeguarding risks, staff should be alert to changes in children's behaviour, which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children who might be at risk of radicalisation and act proportionately which may include the designated safeguarding lead (or deputy) making a Prevent referral.

### **8.10 The Prevent Duty**

1. Our designated safeguarding lead and deputies are aware of local procedures for making a Prevent referral and our college is subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 (the CTSA 2015), in the exercise of their functions, to have "due regard to the need to prevent people from being drawn into terrorism".

2. This duty is known as the PREVENT Duty.

3. The PREVENT Duty will be seen as part of colleges' wider safeguarding obligations.

4. Our Designated Safeguarding Leads and other senior leaders will familiarise themselves with the revised Prevent Duty Guidance

<https://www.gov.uk/government/publications/prevent-duty-guidance>

5. The guidance is set out in terms of four general themes: risk assessment, working in partnership, staff training, and IT policies.

6. The guidance for Prevent duty for further education institutions in England and Wales (2015), updated 7 May 2024 applies to colleges.

### **8.11 Sexual Violence & Harassment**

1. We are familiar with the guidance and information contained with part 5 KCSiE 2024 and also DfE guidance

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/999239/SVSH\\_2021.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/999239/SVSH_2021.pdf) which has been produced to assist schools and colleges to manage cases of sexual violence and harassment between students.

2. At our college we believe that all children and young people have a right to attend college and learn in a safe environment. Children and young people should be free from harm by staff in the college and other students.

3. We recognise that some students will sometimes negatively affect the learning and wellbeing of others and their behaviour will be dealt with under the college's behaviour policy or anti-bullying policy in the first instance.

4. However, we recognise that some allegations may be of such a serious nature that they may raise safeguarding concerns.

5. **All staff** should recognise that children are capable of abusing other children. All our staff should be clear about our college policy and procedures with regard to child on child abuse.

6. We recognise the importance of an ambitious broad and balanced programme which develops students' understanding of consent, acceptable behaviour, keeping themselves safe and healthy relationships.

7. We will ensure that, in our college, our policy will include procedures to minimise the risk of child on child abuse.

8. We recognise and will ensure that systems should be in place (and they should be well promoted, easily understood and easily accessible) for students to confidently report abuse, knowing their concerns will be treated seriously.

9. We understand that schools and colleges not recognising, acknowledging or understanding the scale of harassment and abuse and/or downplaying some behaviours related to abuse can lead to a culture of unacceptable behaviour, an unsafe environment and in worst case scenarios a culture that normalises abuse leading to children and young people accepting it as normal and not coming forward to report it. We will ensure we have a positive cultural of challenge and reporting in our college.

10. We recognise that children and young people may not find it easy to tell staff about their abuse verbally. We understand children and young adults can show signs or act in ways that they hope staff will notice and react to. In some cases, the victim may not make a direct report. For example, a friend may make a report, or a member of staff may overhear a conversation that suggests a student has been harmed or a student's own behaviour might indicate that something is wrong. As per this policy, if staff have any concerns about a student's welfare, they should act on them immediately rather than wait to be told.

11. As always when concerned about the welfare of a student, all our staff should act in the best interests of the student. In all cases, the college should follow general safeguarding principles as set out throughout this policy. Immediate consideration should be given as to how best to support and protect the victim and the alleged perpetrator(s) (and any other student involved/impacted).

12. The starting point regarding any report should always be that there is a zero-tolerance approach to sexual violence and sexual harassment, and it is never acceptable, and it will not be tolerated. It is especially important not to pass off any sexual violence or sexual harassment as "banter", "just having a laugh", "part of growing up" or "boys being boys" as this can lead to a culture of unacceptable behaviours and an unsafe environment for children and young people.

13. Our college recognises sexual violence, and sexual harassment can occur between two children of **any** age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children.

14. Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing. This will, in all likelihood, adversely affect their educational and personal development. Sexual violence and sexual harassment exist on a continuum and may overlap, they can occur online and offline (both physical and verbal) and are never acceptable.

15. It is important that **all** victims are taken seriously and offered appropriate support. Staff should be aware that some groups are potentially more at risk. Evidence shows girls, children with SEND and LGBT children are at greater risk.

### **8.12 Our staff will recognise the importance of:**

1. Making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up.
2. Not tolerating or dismissing sexual violence or sexual harassment as "banter", "part of growing up", "just having a laugh" or "boys being boys".
3. Challenging behaviours (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia, flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them.
4. Recognition of the gendered nature of child on child abuse (i.e., that it is more likely that girls will be victims and boys' perpetrators), but that all peer-on-peer abuse is unacceptable and will be taken seriously.
5. The different forms of child to child abuse can take, such as: bullying (including cyberbullying).
6. Sexual violence and sexual harassment. (Which is covered in much more detail below).

Consensual and non-consensual sharing of nudes and semi-nude images and/or videos (also known as sexting or youth produced sexual imagery) Also covered below.

7. Causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party.
8. Upskirting, which typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm.
9. Initiation/hazing type violence and rituals.

### 8.13 Preventing Child on Child Abuse

As a college we will:

1. Provide a developmentally appropriate education programme which develops students' understanding of consent, acceptable behaviour, keeping themselves safe and healthy relationships.
2. Have systems in place for any student to raise concerns with staff, knowing that they will be listened to, believed and valued.
3. Deliver targeted work on assertiveness and keeping safe to those students identified as being at risk.
4. Develop robust risk assessments and providing targeted work for students identified as being a potential risk to other students.
5. Provide clarity on how allegations of peer-on-peer abuse will be recorded, investigated and dealt with.
6. Have clear processes as to how victims, perpetrators and any other child affected by peer-on-peer abuse will be supported.
7. Provide a clear statement that abuse is abuse and should never be tolerated or passed off as "banter", "just having a laugh" or "part of growing up".
8. Recognise the gendered nature of peer-on-peer abuse (i.e., that it is more likely
9. that girls will be victims and boys' perpetrators), but that all peer-on-peer abuse is unacceptable and will be taken seriously

### 8.14 Sexual violence

We recognise it is important that our staff are aware of sexual violence and the fact children and young people can, and sometimes do, abuse their peers in this way. When referring to sexual violence we are referring to sexual offences under the Sexual Offences Act.

**Rape:** A person (A) commits an offence of rape if: he intentionally penetrates the vagina, anus or mouth of another person (B) with his penis, B does not consent to the penetration and A does not reasonably believe that B consents.

**Assault by Penetration:** A person (A) commits an offence if: s/he intentionally penetrates the vagina or anus of another person (B) with a part of her/his body or anything else, the penetration is sexual, B does not consent to the penetration and A does not reasonably believe that B consents.

**Sexual Assault:** A person (A) commits an offence of sexual assault if: s/he intentionally touches another person (B), the touching is sexual, B does not consent to the touching and A does not reasonably believe that B consents.

### 8.15 What is consent?

Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another, e.g., to vaginal but not anal sex or penetration with conditions, such as wearing a condom. Consent

can be withdrawn at any time during sexual activity and each time activity occurs. Someone consents to vaginal, anal or oral penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice.

#### 8.16 Sexual harassment

1. When referring to sexual harassment we mean 'unwanted conduct of a sexual nature' that can occur online and offline. When we reference sexual harassment, we do so in the context of child-on-child sexual harassment. Sexual harassment is likely to: violate a child's dignity, and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment.

2. Whilst not intended to be an exhaustive list, sexual harassment can include:

- Sexual comments, such as: telling sexual stories, making lewd comments,
- making sexual remarks about clothes and appearance and calling someone
- sexualised names;
- Sexual "jokes" or taunting;
- Physical behaviour, such as: deliberately brushing against someone, interfering with someone's clothes (schools and colleges should be considering when any of this crosses a line into sexual violence - it is important to talk to and consider the experience of the victim) and displaying pictures, photos or drawings of a sexual nature; and
- Online sexual harassment. This may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence. It may include:  
Non-consensual sharing of sexual images and videos; Sexualised online bullying; Unwanted sexual comments and messages, including, on social media; and Sexual exploitation; coercion and threats

#### 8.17 Upskirting

1. Our college recognises that upskirting is a criminal offence and we will take any allegations of such behaviour very seriously.
2. Upskirting typically involves taking a picture up or under a person's clothing without them knowing. The picture is taken with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm.
3. When an allegation of upskirting is brought to our attention we will respond as we would for any other disclosure of potential abuse.
4. We will follow the principles as set out in responding to reports of sexual violence and harassment above and will take advice from IFD on how to progress any allegation of upskirting.
5. Where any suspect for a case of upskirting is identified as being a student at our college we will initially be guided by police but will always seek to support that student in accordance with the principles set out in 22.23 below.

#### 8.18 Sharing Nudes and semi-nude images

We recognise the guidance issued in December 2020 by the Dept for Digital, Culture, Media and Sport and the UK Council for Internet Safety published guidance Sharing nudes and semi nudes: advice for education settings working with children and young people. This guidance separates incidents of those under 18 sharing nude or semi-nude images into two broad areas: 1 - aggravated and 2 - experimental.

1. Aggravated can be sub-categorised into the following areas:

- An adult is involved,
- Youth only and there is an intent to harm – for example used to threaten or exploitation, Youth only and reckless misuse – for example sharing images widely without consent but no intent to harm.

2. Experimental can be sub-categorised into the following areas:

- Where images have been shared within a romantic context
- Where young people share images of themselves with others for sexual attention\*
- Another reason

<https://www.gov.uk/government/publications/sharing-nudes-and-semi-nudes-advice-for-education-settings-working-with-children-and-young-people>

\*The guidance identifies sexual attention seeking. The phrase 'sexual attention seeking' is taken directly from the typology, however, it is important to note that incidents within this category can be a part of normal childhood. A child or young person should not be blamed for taking and sharing their image.

## 5. Response

We will have a thorough understanding of the guidance and assess each case on its own merits. Where aggravating factors may be present, the matter should be referred to police on 101 and IFD.

Where there are no clear aggravating factors, settings should consider whether a safeguarding referral to IFD should still be made, taking advice from IFD where appropriate.

## 9 CHILDREN REQUIRING MENTAL HEALTH SUPPORT

1. We recognise our college has an important role to play in supporting the mental health and wellbeing of our students.
2. We recognise mental health problems can, in some cases, be an indicator that a child or young persons has suffered or is at risk of suffering abuse, neglect or exploitation.

### 9.1 College's Emotional Well-being Leads

1. Our college's Lead Facilitator's are responsible for Emotional Well-being, Anna Hayes at our Shoreham site, Jessica Barnard and Amy Wayne (maternity cover) at our Worthing site.
2. As a college we will have a clear system and process in place for identifying possible mental health problems, including routes to escalate and clear referral and accountability systems. We will make sure all staff and volunteers are aware of our system.
3. Where there are concerns about the mental health, wellbeing and safeguarding of a student, staff will immediately discuss those concerns with the DSL.
4. We are aware of recent government publications:
  - Preventing and tackling bullying  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/623895/Preventing\\_and\\_tackling\\_bullying\\_advice.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/623895/Preventing_and_tackling_bullying_advice.pdf)
  - Mental health and behaviour in schools  
<https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2> and
  - Promoting children and young people's emotional health and wellbeing  
<https://www.gov.uk/government/publications/promoting-children-and-young-peoples-emotional-health-and-wellbeing>

## 9.2 West Sussex Single Point of Access (SPoA)

1. Following a Sussex-wide review of emotional wellbeing and mental health services for children and young people, a new West Sussex Single Point of Access (SPoA) for emotional wellbeing and mental health support launched in June 2022. Any child or young person up to the age of 18 may make, or be referred to SPoA. Post 18 a young person's quickest route to intervention is through their own GP.
2. The new service provides a simplified single route so that children, young people, families, carers and professionals can be directed to the right service, eliminating the need to refer to multiple services.
3. Led by Sussex Partnership NHS Foundation Trust's Child and Adolescent Mental Health Service (CAMHS), the new arrangement is delivered in partnership with West Sussex County Council's Youth Emotional Support Service (YES) and YMCA Dialogue.
4. The three services work together to process (triage) the referrals and determine which service is the most appropriate offer for the young person, which may also include partnership services. In time, more emotional wellbeing services will be introduced into the service.

## 9.3 Making a referral

- Young people, parents/carers and wider professionals can now make a referral to the West Sussex SPoA at [www.e-wellbeing.co.uk/support](http://www.e-wellbeing.co.uk/support)

Key details:

- The SPoA will be open Monday to Friday 9am-5pm
- The young person must consent to the request for service and understand they may be directed to another service outside the SPoA
- The service will accept referrals for children and young people from the age of four up to the young person's 18th birthday, who are registered with a West Sussex GP, whilst recognising and working within NHS CHOICE regulations
- If a young person who is close to turning 18 is referred to the service with a mental health need they will be signposted to adult services.

## 9.4 Additional Services

1. Our staff are aware of the West Sussex Community Mental Health Liaison Service <https://www.sussexpartnership.nhs.uk/west-sussex-cmhl-service> who provide an early intervention and prevention service for professionals who are working with young people under the age of 18 and are concerned about a young person's mental health and wellbeing.
2. We are aware that we can obtain advice and support from School Nursing Service <https://www.sussexcommunity.nhs.uk/downloads/services/west-sussex-school-nursing/west-sussex-school-nursing-leaflet.pdf>
3. We are also aware of the resources available to our college from the Mentally Healthy Schools website <https://www.mentallyhealthyschools.org.uk/>
5. For any students aged 15-19 we are aware of the ChatHealth text service <https://www.sussexcommunity.nhs.uk/services/chathealth-text-messaging-service/108923> and YES Youth Emotional Support Service <https://www.westsussex.gov.uk/education-children-and-families/your-space/health/emotional-wellbeing-and-mental-health/youth-emotional-support-yes-service/>
6. We are also aware of how we can refer a child or young person to CAMHS <https://www.westsussex.gov.uk/media/12781/camhsref.pdf>

## 9.5 Self-Harm Guidance for Schools

1. Self-harm page accessible to all schools and colleges in West Sussex County council can be found at <https://schools.westsussex.gov.uk/Services/4720> Here you can find information, training and resource in relation to self-harm. This includes bespoke self-harm and distress tolerance sessions that can be accessed for free at any time as well as updates on new innovative projects in relation to self-harm.
2. Also available on the self-harm page is managing self-harm guidance and tool kit for schools.
3. As a college we recognise the self-harm resources are available to anyone in education, to support staff when dealing with students who self-harm or are at risk of intentionally harming themselves.

## 9.6 COVID-19

We are aware of the effect that the COVID-19 Pandemic can have and has had on the mental health and wellbeing of children and young people and we recognise that we will provide support to all our children and young people.

## 9.7 Mental Health and RE/RSE/HE

Through our programme, our college will maximise the opportunities to teach our children and young people about mental health as part of the health education cornerstone of our Relationship Education/Relationship and Sex Education and Health Education.

# 10. DEALING WITH A DISCLOSURE

## 10.1 Brighton Forward ensures:

That our college will be a safe place where children and young people feel able to talk to a trusted member of staff if they are concerned or worried.

That all staff, including volunteers, will know how to respond appropriately should a student disclose to them.

## 10.2 If a child discloses – we will:

1. Accept what the child or young person says.
2. Stay calm; the pace should be dictated by the child or young person without them being pressed for detail. DO NOT ASK LEADING QUESTIONS such as "did x touch you there?" It is our role to listen - not to investigate.
3. If more information is needed to establish if there has been abuse use open questions such as "describe what happened?" "Tell me what happened?"
4. Use cognitively-appropriate vocabulary and language; avoid jargon or terms the child or young person may not understand.
5. Be careful not to burden the child or young person with guilt by asking questions like "Why didn't you tell me before?" but you could ask 'Have you spoken to anyone else about this?'
6. Acknowledge how hard it maybe for the child or young person to tell anyone what has happened.
7. Not criticise the perpetrator, the child or young person may well have a relationship with them.
8. Not promise confidentiality but reassure the child or young person that they have done the right thing, explain whom we will have to tell (the Designated Safeguarding Lead) and why and, depending on the child's age, what the

next stage will be. It is important that we **avoid making promises** that we cannot keep such as "I'll stay with you all the time" or "it will be all right now."

9. The Designated Safeguarding Lead will decide on when and how to contact the parent / carer to share concerns.
10. The Designated Safeguarding Lead will share concerns with parents / carers before making a referral to IFD unless by doing so could escalate the risk to the child or vulnerable young person or impede a police investigation.
11. If we are in any doubt as to whether to refer the matter, we will speak and discuss with IFD.

#### 10.3 When recording information, we will:

1. Be aware that any records made may well be used in subsequent investigations and possible court hearings.
2. Make detailed notes at the time or immediately afterwards; record the date, time, place and context of disclosure or concern. Record facts and what was said but not your assumption or interpretation.
3. If it is an observation of bruising or an injury record the detail, e.g., "right arm above elbow".
  - a Use skin / body maps if necessary
  - b Not take photographs.
  - c Note the non-verbal behaviour and the key words in the language used by the child but do not to translate into 'adult language'.
  - d Record the date, time, and location where the notes were made and if anyone else was present.
  - e Pass the notes as soon as possible to the Designated Safeguarding Lead.

#### 10.4 Reporting Forms

Reporting forms will be readily available to all staff who may require them. Staff should not have to print forms off before being able to complete them.

1. Even where we have a computerised safeguarding system, we will still have paper reporting forms readily available to all staff, so they record concerns as soon as possible. (For example, where the computer system is 'down' or where the member of staff cannot gain access quickly to record the disclosure immediately).
2. All paper records will be retained as per the record keeping section below. Where an electronic system is in operation, paper records of any disclosures by a child or record made by a staff member relating to a disclosure will be uploaded and the original paper record also retained.

#### 10.5 Support for staff

1. It is recognised that staff working in our college who have become involved with a child or young person who has suffered harm or appears to be likely to suffer harm may find the situation stressful and upsetting.
2. The college will support such staff by providing an opportunity to talk through their anxieties with the designated safeguarding lead and to seek further support as appropriate.

#### 10.6 Female Genital Mutilation (FGM)

It is a legal obligation to report acts of FGM.

1. Female Genital Mutilation (FGM) comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female

genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences.

2. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM.
3. From 31<sup>st</sup> October 2015, regulated health and social care professionals and teachers in England and Wales must report 'known' cases of FGM in under 18's which they identify in the course of their professional work to the police.
4. Where a case of FGM is suspected or if you believe a child / young person is about to suffer FGM or is about to leave the country in order to suffer FGM – we will call the police immediately, and by 999 when it is an emergency.
5. Irrespective of calling the police we will also immediately refer the matter to IFD, including out of hours where relevant.
6. The Home Office has published procedural information on the duty to help health and social care professionals, teachers and the police understand: the legal requirements placed upon them, a suggested process to follow, and an overview of the action which may be taken if they fail to comply with the duty. It also aims to give the police an understanding of the duty and the next steps upon receiving a report.
7. Guidance can be obtained here;
  - Home Office: Mandatory Reporting of FGM – procedure information
  - FGM Mandatory Reporting Fact Sheet
  - FGM Reporting Flowchart for under 18's

## **11. REFERRING A CHILD TO THE INTEGRATED FRONT DOOR (IFD)**

11.1 If a child or young person is in immediate danger the police must be called by dialling 999.

11.2 If a member of staff has concerns about a child or young person;

1. The member of staff will report their concerns to the Designated Safeguarding Lead or in their absence, the Deputy Safeguarding Lead.
2. The Designated Safeguarding Lead will refer to the West Sussex Safeguarding Partnership Continuum of Need/Threshold Guidance<sup>1</sup> and decide whether the concerns should be referred to the Integrated Front Door (IFD). If there are grounds to indicate the child or young person has or is likely to suffer actual or suspected significant harm, then a referral will be made to the IFD using the relevant online form. Where concerns are urgent, complex or where it is unclear whether a referral should be made, the Designated Safeguarding Lead should contact the IFD by telephone for advice on 01403 229900, or out of hours on 0330 222 6664.
3. If it is decided to make a referral to the IFD, parents must be contacted to inform them that the referral is being made unless to do so would place the child at further risk of harm or could impact on a police investigation (the IFD is able to provide advice on this). If parents are avoidant of contact, or declining to engage, referrals should not be delayed unduly.
4. If it is considered likely that **by informing parents/carers of the referral will increase the risk** to the child or young person advice MUST BE SOUGHT FROM IFD before INFORMING, the PARENT/CARER.

5. The steps outlined in **section 23 below, 'Dealing with a Disclosure'**, will be followed by staff members to record details of any concerns which must be done as soon as possible and on the same day. The signed and dated recording must be a clear, precise, factual account of the observations.
6. Where IFD have been contacted for advice and indicate a referral should be made, the Designated Safeguarding Lead will ensure the correct online forms at point 1 in this section above are completed immediately.
7. The college child and young person protection records must reflect who was spoken to at IFD along with the time and date of that contact. The college child and young person protection records must also clearly record any advice given and what steps the college have taken. This will include where there are disagreements between college and IFD and will clearly indicate what next steps the college is taking to resolve the disagreement.

### 11.3 Information Sharing

1. Our college will comply with the information sharing aspects of KCSiE 2024 – which are outlined at para-2.
2. Information sharing is vital in identifying and tackling all forms of abuse and neglect, and in promoting students' welfare, including their educational outcomes. Schools and colleges have clear powers to share, hold and use information for these purposes.
3. As part of meeting a child and young person's needs, it is important for governing bodies and proprietors to recognise the importance of information sharing between practitioners and local agencies. This should include ensuring arrangements are in place that set out clearly the processes and principles for sharing information within the college and with children or adult's social care, the safeguarding partners, other organisations, agencies, and practitioners as required.
4. College staff should be proactive in sharing information as early as possible to help identify, assess, and respond to risks or concerns about the safety and welfare of students, whether this is when problems are first emerging, or where a student is already known to the local authority children or adult's social care.
5. It is important that governing bodies and proprietors are aware that among other obligations, the Data Protection Act 2018, and the UK General Data Protection Regulation (UK GDPR) place duties on organisations and individuals to process personal information fairly and lawfully and to keep the information they hold safe and secure.
6. Governing bodies and proprietors should ensure relevant staff have due regard to the relevant data protection principles, which allow them to share (and withhold) personal information, as provided for in the Data Protection Act 2018 and the UK GDPR. This includes:
  - a Being confident of the processing conditions which allow them to store and share information for safeguarding purposes, including information, which is sensitive and personal, and should be treated as 'special category personal data'.
  - b Understanding that 'safeguarding of children, young people and individuals at risk' is a processing condition that allows practitioners to share special category personal data. This includes allowing practitioners to share information without consent where there is good reason to do so, and that the sharing of information will enhance the safeguarding of a child in a timely manner, but it is not possible to gain consent, it cannot be

- reasonably expected that a practitioner gains consent, or if to gain consent would place a child at risk. (Para 118 KCSiE 2024)
- c For schools, not providing pupils' personal data where the serious harm test under the legislation is met. For example, in a situation where a child is in a refuge or another form of emergency accommodation, and the serious harms test is met, they must withhold providing the data in compliance with schools' obligations under the Data Protection Act 2018 and the UK GDPR. Where in doubt schools should seek independent legal advice.
  7. The Data Protection Act 2018 and UK GDPR do not prevent the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to safeguard and promote the welfare and protect the safety of children.
  8. Further details on information sharing can be found in:
    - in Chapter one of Working Together to Safeguard Children, which includes a myth-busting guide to information sharing.
    - Information Sharing May 2024: Advice for Practitioners Providing Safeguarding Services to Children, Young People, Parents and Carers. The seven golden rules for sharing information will be especially useful.
    - The Information Commissioner's Office (ICO), which includes ICO UK GDPR FAQs and guidance from the department.
    - Data protection: toolkit for schools - Guidance to support schools with data protection activity, including compliance with the UK GDPR.
  - 9 If in doubt whether to share information we will take advice from IFD. Further advice on the seven golden rules for sharing information for staff can be found in the following document, *Advice for practitioners providing safeguarding services to children, young people, parents and carers and guidance, amended May 2024* which can be accessed.  
[DfE non statutory information sharing advice for practitioners providing safeguarding services for children, young people, parents, and carers \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)
  - 10 The Data Protection Act 2018 and GDPR do not prevent the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare and protect the safety of children, which must always be the paramount concern.
  - 11 Effective sharing of information is essential for early identification of need, assessment, and service provision to keep children safe.
  - 12 Practitioners should be proactive in sharing information as early as possible to help identify, assess, and respond to risks or concerns about the safety and welfare of children and young people, whether this is when problems are first emerging, or where a child is already known to local authority children or adult's social care (e.g., they are being supported as a child in need or have a child protection plan).
  - 13 Practitioners should be alert to sharing important information about any adults with whom that child has contact, which may impact the child's safety or welfare.
  - 14 Information sharing is also essential for the identification of patterns of behaviour when a child or young person has gone missing, when multiple children or young people appear associated to the same context or locations of risk, or in relation to children in the secure estate where there may be multiple local authorities involved in a child's or vulnerable young adult's care. It will be for local safeguarding partners to consider how they will build positive

relationships with other local areas to ensure that relevant information is shared in a timely and proportionate way.

- 15 If a practitioner has concerns about a child or young person's welfare and considers that they may be a child or young person in need or that the child or young person has suffered or is likely to suffer significant harm, then they should share the information with local authority children's or adult's social care and/or the police. All practitioners should be particularly alert to the importance of sharing information when a child or young person moves from one local authority into another, due to the risk that knowledge pertinent to keeping a child or young person safe could be lost.
- 16 Practitioners must have due regard to the relevant data protection principles which allow them to share personal information, as provided for in the Data Protection Act 2018 and the General Data Protection Regulation (GDPR). To share information effectively: it is important to understand the processing conditions under the Data Protection Act 2018 and the GDPR which allow them to store and share information for safeguarding purposes, including information, which is sensitive and personal, and should be treated as 'special category personal data'.
- 17 We are aware of the [Data protection toolkit for schools](#) which we will use to assist in complying with GDPR.

#### 11.4 Taking Responsibility

1. Staff should not assume a colleague or another professional from another organisation is making a referral. It is the duty of the DSL to take action and ensure information is shared in order to keep a child and young person safe.
2. In addition, our college will ensure that all staff, including volunteers, will have confidence and know how to contact IFD in the unlikely event that the DSL or deputy are not available. This will also be the case where any member of staff is concerned that the DSL or deputy is not taking concerns seriously.
3. In addition, we encourage all members of staff, including volunteers to recognise and respond to safeguarding concerns which occur in the community and are nothing to do with school, in the appropriate manner by contacting IFD, the police or the NSPCC.

#### 11.5 Early Help

1. The Early Help Service within West Sussex is committed to providing a consistent and accessible family focused service for children, young people, and their families. Through its supporting family's approach to earliest help Early Help aims to ensure that children and young people's needs are met as early as possible, supporting families to resolve issues before they become harder to reverse. Early Help is able to achieve this through its work with a range of partners, with Schools being critical in identifying early indicators where children, young people and families may benefit from additional support.

#### 11.6 Targeted Family Support

1. Early Help will support us to identify the best way forward for children, young people and families with slightly more complex needs, where further targeted intervention and support is required. Support to the college can include providing advice and signposting to the most relevant support services and partners, supporting schools to build confidence referring to appropriate agencies.
2. For children, young people and families featuring any of the following features then a more targeted level of support maybe required, which could be led by

the college or another partner or service. Link workers can support us with how to complete relevant referrals, which can include referral to the IFD with the appropriate consent from parent/carer, including:

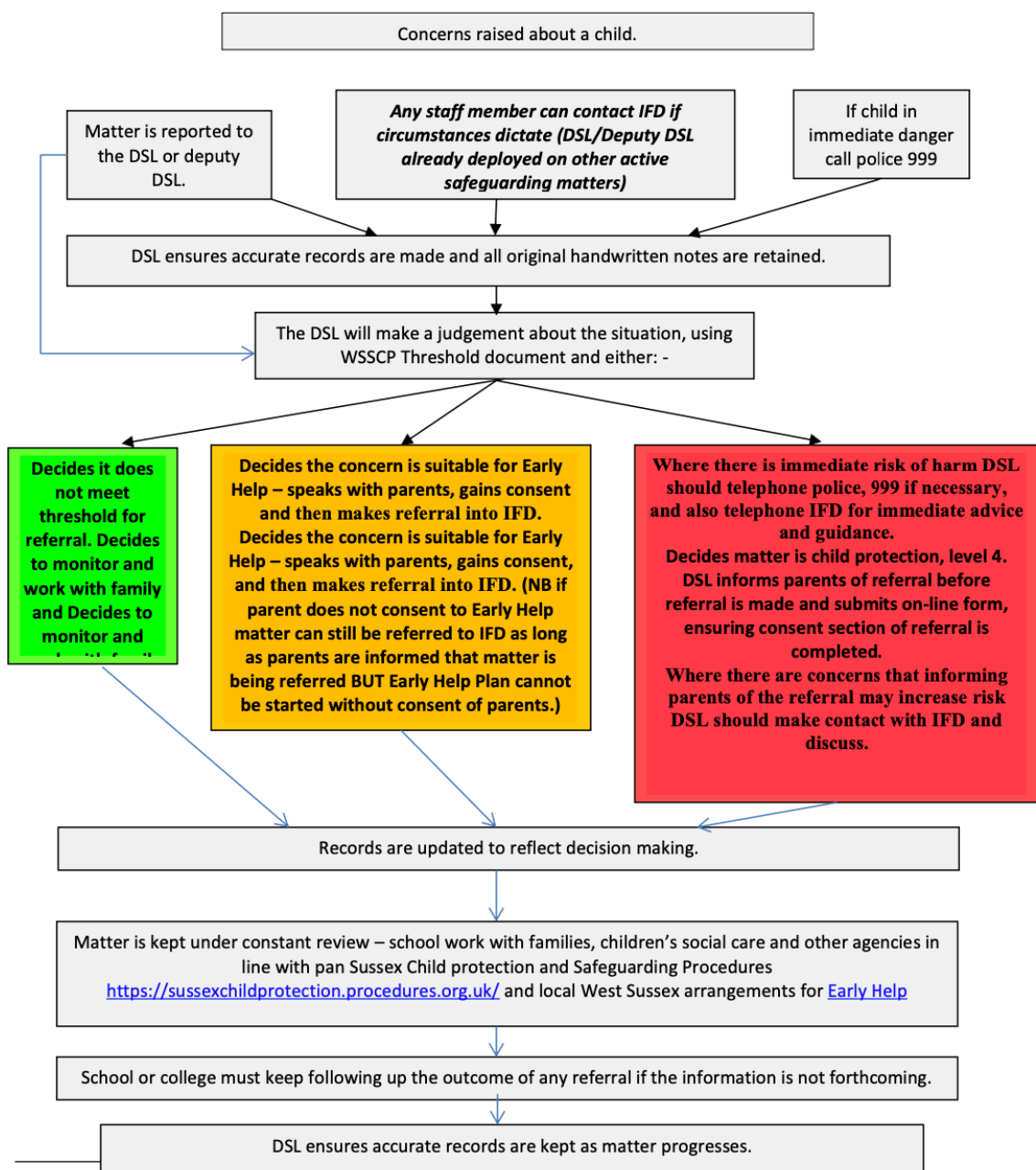
3. Multiple complex issues that impact on the children and family stability
  - a) Entrenched or inter-generational patterns of behaviour
  - b) Issues that affect the whole family
  - c) A history of children social care (CSC) intervention or police involvement
  - d) A coordinated multiagency approach is required
  - e) Risk of escalating to level 4 intervention including risk of family breakdown
  - f) Adults out of work or at risk of financial exclusion and young people at risk of worklessness
  - g) Children and vulnerable young people who have not been attending school regularly
  - h) Parents, children and young people involved in crime and anti-social behaviour
  - i) Parents, children and young people with a range of health problems
  - j) Families affected by domestic violence and abuse
4. Our college will work with our families, parents, and carers, share our concerns with them, work at the earliest opportunity and work with our dedicated team link help worker in order to maximise the offer for those children and young people who may benefit from additional support.
5. Our college will refer to the Integrated Front Door any children/young people that require targeted family support.
6. In our college the DSL will have oversight of all children and young people on Early Help Plans and will regularly review progress and any changes in risk.

#### 11.7 West Sussex Safeguarding Children Partnership Continuum of Need

Our school / college will use the Threshold Guidance<sup>2</sup> to inform our decision making and which referral pathway to take.

## 11.8 Referral Pathway

### 11.9 Flowchart for child protection procedures for schools and colleges



## 12. RECORD KEEPING

### 12.1 Child Protection Files

1. We recognise that KCSiE 2024 makes it clear that **All** concerns, discussions, and decisions made, **and the reasons for those decisions**, should be recorded in writing. Information should be kept confidential and stored securely. It is good practice to keep concerns and referrals in a separate child protection file for each child and young person. And,
2. That Records should include:
  - a a clear and comprehensive summary of the concern;
  - b details of how the concern was followed up and resolved; a note of any action taken, decisions reached and the outcome.
3. If in doubt about recording requirements, staff should discuss with the designated safeguarding lead (or deputy).
4. In our college we recognise the fundamental safeguarding practice of accurately recording safeguarding information.

In our college:

- Records kept for child protection purposes will be kept securely, separate from other records, and accessed only by those who need to do so for safeguarding and/or monitoring purposes.
- Each child or young person will have a separate record.
- Each record will be accurate, legible and entries made as soon as practicable after a concern is raised.

Each recorded concern will have.

- a) a clear and comprehensive record of the concern,
  - b) details of how the concern was followed up and
  - c) a clear record of any action taken, decisions reached and the outcome, including any challenge / escalation to any other agency.
5. It is anticipated that more than one member of staff will have access to records and be able to make entries into a child or young person's safeguarding records. Whether there is any doubt about whether to make a record or not staff must consult with the DSL.
  6. Where computer systems are used, staff will still have access to paper forms so immediate conversations with a child/body map drawing etc. can be made contemporaneously.
  7. Any paper records generated at 4 above will be retained within the file, even where they have been scanned to a computer record.
  8. Where there is more than one sibling, each sibling will have their own record, cross-referenced where necessary to their siblings.
  9. Each file will have a chronology to enable assessment, provide an overview and enable fast time assessment of previous activity.
  10. Each file will have an up-to-date contact number for other key professionals.

### 12.2 When a child or young person moves to another provision

1. Any child protection files relating to that child or young person will be transferred / retained in accordance with guidelines which can be found in the

Information Management Toolkit for Schools found  
<https://irms.org.uk/page/SchoolsToolkit>

2. It is to be noted that young people over the age of 18 need to give consent to have their files shared with future provisions. If they do not have the capacity to do so parental authorisation must be obtained.
3. In line with statutory guidance within KCSiE, where children leave the school or college, the DSL will ensure their child protection file is transferred to the college as soon as possible, and within five days, ensuring secure transit, and confirmation of receipt should be obtained.
4. As the receiving college we ensure that the DSL and deputies are aware as required.
5. In addition to the child protection file, the DSL will also consider if it would be appropriate to share any information with the new college in advance of a child or young person leaving. For example, information that would allow the new college to continue supporting victims of abuse and have that support in place for when the child or young person arrives.
6. In accordance with the Information Management Toolkit for Schools, when a child moves from our college to another, the file will move with them. We will not copy nor retain the child protection file unless they are to be used in ongoing proceedings. (Noting the exceptions when the child or young person moves to an independent school or post 16 education provision)

### **13. LOCAL AUTHORITY DESIGNATED OFFICER (LADO)**

West Sussex County Council Designated Officer (LADO) Contact Details:

LADO should be contacted either by email: [LADO@westsussex.gov.uk](mailto:LADO@westsussex.gov.uk) or by phone, LADO Consultation Contact No. 0330 222 6450 (9.00am – 5.00pm)

#### **13.1 West Sussex County Council Designated Officer Service: Guidance & Information**

Full guidance, is found here

<https://www.westsussexscp.org.uk/professionals/professionaldisagreements-and-concerns/ladoinformation> regarding the Designated Officer Service can be found on the West Sussex Safeguarding Children Partnership (WSSCP).

#### **13.2 Those who may pose a risk of harm to children and young people.**

1. Our college will follow the guidance as set out in Part 4 of Keeping Children Safe in Education 2024.
2. We will follow that guidance where it is alleged that anyone working in the college that provides education for children under 18 years of age, including supply teachers, volunteers and contractors has:
  - a Behaved in a way that has, or may have harmed a child or young person;
  - b Possibly committed a criminal offence against/related to a child or young person;
  - c Behaved towards a child, children or young person in a way which indicates they would pose a risk of harm if they work regularly or closely with them;
  - d Behaved or may have behaved in a way that indicates they may not be suitable to work with children or young people.
3. We recognise that point d above includes behaviour that may have happened outside of college, that might make an individual unsuitable to work with children or young people

4. As a college we will appoint a case manager to lead any investigation. If the allegation relates to a member of staff, the headteacher will be the case manager. If the allegation is regarding the headteacher, then the local authority or child protection services will investigate.

### 13.3 The initial response to an allegation

- 1 Where a child or young person has been harmed, where there is an immediate risk of harm to a child or young person or if the situation is an emergency, we will contact children or adult's social care and as appropriate the police immediately.
- 2 We recognise there are two aspects to consider when an allegation is made:
  - a) **Looking after the welfare of the child or young person** - the DSL is responsible for ensuring that the child or young person is not at risk and referring cases of suspected abuse to the Integrated Front Door
  - b) **Investigating and supporting the person subject to the allegation** - the case manager should discuss with the LADO, the nature, content, and context of the allegation, and agree a course of action.
- 3 When dealing with allegations, we will follow the guidance contained within <https://www.westsussexscp.org.uk/professionals/professional-disagreements-andconcerns/ladoinformation>

### 13.4 Informing the Individual

- 1 When to inform the individual of the allegation should be considered carefully on a case-by-case basis, with guidance as required from the LADO, and if appropriate children or adult's social care and the police.

### 13.5 LADO / Case Manager and investigation

1) As a college we are familiar with Part Four of KCSiE 2024. We will follow the guidance in Part Four and guidance from LADO when considering issues such as suspension, use of independent investigator, and timeliness of any investigations.

### 13.6 College Complaints

- 1 Complaints by parents about any aspect of the college MUST be reviewed to ensure there are no allegations against staff, including volunteers, contained within the complaint which require referral to LADO.

### 13.7 Allegations against member of staff, including supply staff, contracted staff and volunteers.

1. An immediate written record of the allegation using the informant's words including time, date, and place where the alleged incident took place, brief details of what happened, what was said and who was present will be made.
2. This record should be signed, dated, and immediately passed on to the Managing Director.
3. The recipient of an allegation must not unilaterally determine its validity and failure to report it in accordance with procedures is a potential disciplinary matter. The Managing Director will not investigate the allegation themselves, or take written or detailed statements, but will assess and decide whether to refer the concern to the LADO. If there is any doubt as to whether to refer, advice should be taken from the LADO.

4. If there are concerns that a child or young person is at risk, the matter must be immediately reported to IFD.
5. Any records generated during such matters must be retained securely, away from other child protection and personnel records and only be accessed by those who need to for investigation/review purposes.
6. We follow the guidelines contained within the Pan Sussex Child Protection and Safeguarding Procedures in respect of managing allegations made against people who work or volunteer with children, <https://sussexchildprotection.procedures.org.uk/tkyphy/children-in-specificcircumstances/allegations-against-people-who-work-with-care-for-or-volunteer-withchildren> must be followed on each occasion. If there is any doubt, then advice must be taken from the LADO.
7. Where an allegation is made against a supply teacher or contracted staff, whilst we recognise, we are not the employer of supply teachers or contracted staff, we will ensure allegations are dealt with properly. In no circumstances will we decide to cease to use a supply teacher due to safeguarding concerns, without finding out the facts and liaising with the LADO to determine a suitable outcome.

#### 13.8 Non recent allegations

1. We will refer any non-recent allegation to the LADO, irrespective of how long ago it occurred. We will also encourage the person making the allegation to report the matter to the police if a criminal offence has or could have been committed.

#### 13.9 Supporting those involved

1. When an allegation or safeguarding concern is being investigated it is likely to be a very stressful experience for the adult subject of the investigation, and potentially for their family members. We recognise it is important, as the employer, that we offer appropriate welfare support at such a time and recognises the sensitivity of the situation. We recognise information is confidential and should not ordinarily be shared with other staff or with children, young people or parents who are not directly involved in the investigation.
2. We recognise we have a duty of care to our employees and as such we will:
  - a manage and minimise the stress caused by the allegation;
  - b inform the individual as soon as possible, explaining the likely course of action, guided by the LADO, and the police where necessary;
  - c advise the individual to contact their trade union representative, or a colleague for support;
  - d appoint a named representative to keep the person informed about progress of the case;
  - e provide access to counselling or medical advice where appropriate;
  - f not prevent social contact with work colleagues and friends, when staff are suspended, unless there is evidence to suggest this may prejudice the gathering of evidence

#### 13.10 Informing Parents or carers of the child or young person involved

1. Parents / carers should formally be told about the allegation as soon as possible. The case manager will liaise with the LADO, and where appropriate children or adult's social care and police on what information can be disclosed.

2. As a college we will follow KCSiE 2024 when informing and updating parents. We will follow those paras regarding the need for confidentiality and where relevant outline to any party, including parents and carers the restrictions imposed by The Education Act 2011, amended the Education Act 2002, regarding reporting restrictions. These provisions made it an offence (except in the limited circumstance expressly permitted by the legislation), for any person to publish any material that may lead to the identification of a teacher in a school or college who has been accused by, or on behalf of, a child or young person from the same school or college (where that identification would identify the teacher as the subject of the allegation).

#### 13.11 Allegation's outcomes

1. We will follow KCSiE 2024, working in consultation with LADO and other agencies where appropriate.

#### 13.12 Record keeping, references and learning lessons.

1. We will maintain records, provide references, and review the case to ensure any learning is identified and enacted as per KCSiE 2024.

#### 13.13 Concerns that do not meet the harm threshold for referral to LADO.

1. We recognise that KCSiE 2024 has introduced a specific section (Section Two of Part Four) regarding how to respond to concerns that do not meet the harm threshold.
2. The term 'low-level' concern does not mean that it is insignificant, it means that the behaviour towards a child or young person does not meet the threshold for formal referral to LADO. A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a 'nagging doubt' - that an adult working in or on behalf of our college may have acted in a way that:
  - is inconsistent with the staff code of conduct, including inappropriate conduct outside of work; and
  - does not meet the allegations threshold or is otherwise not considered serious enough to consider a referral to the LADO.
3. A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a 'nagging doubt' - that an adult working in or on behalf of our college may have acted in a way that:
  - a) is inconsistent with the staff code of conduct, including inappropriate conduct outside of work and
  - b) does not meet the harm threshold or is otherwise not serious enough to consider a referral to the LADO
  - c) Examples of such behaviour could include, but are not limited to:
  - d) being over friendly with children and young people
  - e) having favourites
  - f) taking photographs of children on their mobile phone, contrary to college policy
  - g) engaging with a child or young person on a one-to-one basis in a secluded area or behind a closed door, or

#### h) humiliating students

4. Such behaviour can exist on a wide spectrum, from the inadvertent or thoughtless, or behaviour that may look to be inappropriate, but might not be in specific circumstances, through to that which is ultimately intended to enable abuse.
5. Low-level concerns may arise in several ways and from a number of sources. For example: suspicion; complaint; or disclosure made by a child, young person, parent, or other adult within or outside of the organisation; or as a result of vetting checks undertaken.
6. It is crucial that all low-level concerns are shared responsibly with the right person and recorded and dealt with appropriately. Ensuring they are dealt with effectively should also protect those working in or on behalf of our college from becoming the subject of potential false low-level concerns or misunderstandings.
7. For such cases, we will follow guidance within KCSiE 2024, part four.
8. Any staff member who has a low-level concern should report those concerns to the Managing Director. Where the concerns relate to the Managing Director the concerns should be reported to the local authority or local child protection services.
9. We recognise that what may appear to be low level concerns can actually relate to serious / significant allegations. As such, where there is any room for doubt, we will consult with the LADO.

#### 13.14 Low level concerns and staff behaviour policy

1. We will ensure that all staff are regularly informed of our staff behaviour policy / code of conduct and updates thereof.
2. We will incorporate low level concerns as an extension of our staff behaviour policy / code of conduct.

#### 13.15 What staff should do if they have concerns about safeguarding practices within the college.

1. All staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in the college's safeguarding regime and know that such concerns will be taken seriously by the Senior Leadership Team. Appropriate whistleblowing procedures, which are suitably reflected in staff training and staff behaviour policies, should be in place for such concerns to be raised with the college's Senior Leadership Team.
2. Where a staff member feels unable to raise an issue with their employer or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them, advice can always be taken from LADO.

#### 13.16 Whistleblowing/Confidential reporting

1. We will ensure that all staff members are aware of their duty to raise concerns, where they exist, about the actions or attitudes of colleagues. If necessary, the member of staff can speak with the Managing Director or with the LADO.
2. We will ensure staff should be aware of and know how to access West Sussex Confidential Reporting Policy,
3. Further assistance for staff to raise concerns can be accessed by calling the NSPCC whistleblowing helpline on 0800 028 0285 or visiting the

<https://www.nspcc.org.uk/keeping-children-safe/reporting-abuse/dedicatedhelplines/whistleblowing-advice-line/>

## **14. SPECIAL EDUCATIONAL NEEDS & DISABILITIES (SEND)**

### **14.1 Special considerations**

1. As a special college, we are aware that children and young people with SEND can face additional safeguarding challenges and expect all staff to recognise:
  - a Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child or young person's disability without further exploration;
  - b Being more prone to peer group isolation than other children or young people;
  - c The potential for children and young people with SEND being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs; and
  - d Communication barriers and difficulties in overcoming these barriers.
  - e We will consider using additional resources such as <https://learning.nspcc.org.uk/safeguarding-child-protection-schools/safeguardingchildren-with-special-educational-needs-and-disabilities-send>

## **15. CHILDREN AND YOUNG PEOPLE WHO ARE LESBIAN, GAY, BISEXUAL, TRANSGENDER (LGBT)**

KCSiE 2024 N.B. This section remains under review, pending the outcome of the gender questioning children guidance consultation, and final gender questioning guidance documents being published.

KCSiE 2024 para 205 states that:

1. A child or young person being lesbian, gay, or bisexual is not in itself an inherent risk factor for harm, however, they can sometimes be targeted by other children and young people. In some cases, a child or young person who is perceived by other children or young people to be lesbian, gay, or bisexual (whether they are or not) can be just as vulnerable as children or young people who are.
2. Risks can be compounded where children and young people who are LGBT lack a trusted adult with whom they can be open. It is therefore vital that staff endeavour to reduce the additional barriers faced and provide a safe space for them to speak out or share their concerns with members of staff.
3. LGBT inclusion is part of the <https://www.gov.uk/government/publications/relationships-educationrelationships-and-sex-education-rse-and-health-education> programme and we recognise there is a range of support available to help colleges counter homophobic, biph and transphobic bullying and abuse.
4. When supporting a gender questioning child or young person, we will take a cautious approach and consider the broad range of their individual needs, in partnership with parents (other than in the exceptionally rare circumstances where involving parents would constitute a significant risk of harm to the child or young person), including any clinical advice that is available and how to address wider vulnerabilities such as the risk of bullying. We will refer to

Guidance for Schools and Colleges in relation to Gender Questioning Children, when deciding how to proceed. (Para 208 KCSiE 2024)

## **16. CHILDREN LOOKED AFTER (previously Looked After Children)**

1. As the Proprietor of this college we will ensure that staff have the skills, knowledge and understanding to keep looked after children, and children who have previously been looked after, and children who have or have ever had social care involvement safe.
2. In particular, we will ensure that appropriate staff have the information they need in relation to a child's looked after legal status (whether they are looked after under voluntary arrangements with consent of parents, or on an interim or full care order) and the child's contact arrangements with birth parents or those with parental responsibility.
3. We will also ensure staff have information about the child's care arrangements and the levels of authority delegated to the carer by the authority looking after them. The DSL and designated teacher should have details of the child's social worker and the name of the virtual school head in the authority that looks after the child.
4. We recognise previously looked after children potentially remains vulnerable and all staff should have the skills, knowledge and understanding to keep previously looked after children safe. When dealing with looked after children and previously looked after children, it is important that all agencies work together and prompt action is taken when necessary to safeguard these children, who are a particularly vulnerable group.
5. We recognise that we have a responsibility to safeguard and monitor the educational outcomes and wellbeing of children with or who have ever had social care involvement.
6. All staff will be provided with an appropriate level of information to understand a child's particular circumstances and vulnerabilities in order to respond and meet their needs appropriately. Staff will work with Social Care colleagues to provide and receive the information necessary to enable effective monitoring and reporting by all professionals involved.

### **16.1 Designated Person for Looked After Children**

1. We recognise as the proprietors that we must appoint a designated person and should work with local authorities to promote the educational achievement of registered students who are looked after. With the commencement of sections 4 to 6 of the Children and Social Work Act 2017, we recognise that the designated person has the responsibility for promoting the educational achievement of children who have left care through adoption, special guardianship, or child arrangement orders or who were adopted from state care outside England and Wales. The designated person must have appropriate training and the relevant qualifications and experience.
2. The designated person for looked after children in our college is Laura Vallone.
  1. We will ensure the designated person is aware of the statutory guidance <https://www.gov.uk/government/publications/designated-teacher-for-looked-after-children>
  2. Our college will work with the headteacher of the Virtual School to discuss how the college can best support the child and meet the needs of the child's Personal Education Plan (PEP) and use any additional resources accordingly.

3. We recognise that the Virtual School head, following the commencement of sections 4 to 6 of the Children and Social Work Act 2017, Virtual School heads have responsibilities towards children who have left care through adoption, special guardianship, or child arrangement orders or who were adopted from state care outside England or Wales.
4. We will pay additional attention to the attendance of children looked after. Where any exclusions are issued for children looked after we will consider whether these are indicative of wider safeguarding concerns and share any concerns with the Head Teacher of the Virtual School and other safeguarding partners as necessary.
5. Previously looked after children potentially remain vulnerable and we will ensure that all staff should have the skills, knowledge and understanding to keep previously looked after children safe. When dealing with Children Looked After and previously looked after children, we will ensure our college works together with other agencies and takes prompt action when necessary to safeguard these children, who are a particularly vulnerable group.

#### 16.2 Care Leavers

1. Local authorities have on-going responsibilities to the young people who cease to be looked after and become care leavers. That includes keeping in touch with them, preparing an assessment of their needs and appointing a Personal Adviser who develops a pathway plan with the young person. This plan describes how the local authority will support the care leaver to participate in education or training.
2. The DSL in our college will have details of the local authority Personal Adviser appointed to guide and support the care leaver and will liaise with them as necessary regarding any issues of concern affecting the care leaver.
3. Details of leaving care personal advisors can be found <https://www.westsussex.gov.uk/education-children-and-families/yourspace/life/leaving-care-local-offer/>

#### 16.3 Virtual School Heads

1. Virtual school heads manage pupil premium plus for looked after children; they receive this funding based on the latest published number of children looked after by the local authority. Our college recognises the designated person will work with the virtual school head to discuss how funding can be best used to support the progress of looked after children in the college and meet the needs identified in the child's personal education plan. The designated person should also work with the virtual school head to promote the educational achievement of previously looked after children.

### **17. CHILDREN POTENTIALLY AT GREATER RISK OF HARM**

17.1 As a college we recognise children and young people may need a social worker due to safeguarding or welfare needs.

1. Children or young people may need this help due to abuse, neglect and/or complex family circumstances. A child or young person's experiences of adversity and trauma can leave them vulnerable to further harm, as well as educationally disadvantaged in facing barriers to attendance, learning, behaviour, and mental health.
2. Local authorities should share the fact a child or young person has a social worker, and our DSL should hold and use this information so that decisions can be made in the best interests of the child and young person's safety, welfare, and educational outcomes. This should be considered as a matter of routine.

3. As outlined above, we recognise there are clear powers to share this information under existing duties on both local authorities and schools and colleges to safeguard and promote the welfare of children and young people.
4. Where children or young people need a social worker, this should inform decisions about safeguarding (for example, responding to unauthorised absence or there is unexplainable and or persistent absences from education where there are known safeguarding risks) and about promoting welfare (for example, considering the provision of pastoral and/or academic support, alongside action by statutory services).

17.2 As a college we are aware

1. Of the findings from the [Children in Need Review](#), [Improving the educational outcomes for Children in Need of help and protection](#) and the detail contained within [Help, protection, education](#).
2. At Brighton Forward, the leadership team takes responsibility for how we can, as a college, assist children and young people who are potentially at greater risk of harm achieve their educational potential.